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ABSTRACT

In recent years, Seminole County Public Schools in Florida, adopted new guidelines for the processing of student expulsions. This manual was designed to clarify the processes associated with student expulsion in secondary schools in Seminole County. It describes the protocols, procedures, and paperwork needed to comply with the school board's requirements for documentation of each expulsion option. Options include full exclusion from any and all Seminole County Public Schools, application to Project Excel (an alternative educational placement), transfer to another county school, or return to home school on a district behavior contract. Three situations require the production of a comprehensive expulsion packet--a recommendation for full exclusion, a request by the student or guardians for a formal hearing, and a recommendation for student application to Project Excel for a second time. Sample forms are included. Some forms in Spanish are also included. (LMI)

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ED 395 389

SEMINOLE COUNTY PUBLIC SCHOOLS

PROTOCOLS FOR PROCESSING SECONDARY STUDENT EXPULSIONS

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PUBLIC SCHOOLS

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January 1, 1996

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INTRODUCTION

In recent years, new guidelines have been adopted for the processing of student expulsions. These revised procedures have brought about a fundamental change in the manner in which recommendations for student expulsion are made and acted upon in Seminole County Public Schools. This manual is provided to schools to assist in the delineation and clarification of the processes associated with student expulsion in secondary schools.

It is imperative for everyone who is involved in the processing of student expulsions to have a common understanding of what is necessary and required for engaging the appropriate procedures associated with each expulsion option. Having a common understanding of these protocols will prevent unnecessary delays in processing recommendations, improve communication between and among all the parties involved (students; parents; school administrators; district administrators), as well as professionalize the entire process.

In the past, every recommendation for expulsion required a due process hearing before the School Board. This, in turn, required the school to produce a comprehensive expulsion packet designed to withstand a legal challenge in a formal hearing before the School Board.

Now, there are three situations which require the production of a comprehensive expulsion packet. The first, is when a student is recommended for full exclusion from any and all Seminole County Public Schools (Option **A**) for a specified period of time. The second, is when a student or a parent/guardian requests a formal hearing before the School Board. The third, is when a student is recommended to apply to Project Excel a second time in his/her secondary school career.

All other expulsion recommendations involve the signing of an *Expulsion Waiver* and a *District Behavior Contract* to hold a student's expulsion in abeyance while the he/she is given the opportunity to re-enroll in a Seminole County Public School. Just where in the district a student is to matriculate, at Project Excel (Option **B**), at an out-of-zone school site (Option **C**), or at the student's zoned school (Option **D**), will be determined

by the recommendation of the principal being accepted by the Superintendent.

The signing of an *Expulsion Waiver* and a *District Behavior Contract* eliminates the formal hearing requirement previously associated with all expulsions. As a result, the school is not required to compile a comprehensive expulsion packet. Instead, a truncated expulsion packet which provides the necessary documentation is assembled by the school.

It is critical to note that the student and his/her parents/guardians must agree to **all elements** of the *Expulsion Waiver* and **all terms** of the *District Behavior Contract* in order for the student to be allowed to re-enroll in Seminole County Public Schools. If the student or the parents refuse to agree, in full or in part, to the elements or terms of either document, then a formal hearing before the School Board is required and the corresponding comprehensive expulsion packet must be prepared by the school.

Truncated expulsion packets that correspond with Consent Agenda expulsion Options **B**, **C**, and **D** are presented to the School Board for approval at a designated Expulsion Hearing, or at a regularly scheduled School Board meeting. Attendance by a school administrator at the designated Expulsion Hearing or School Board meeting is not necessary or required when a student agrees to the elements of the *Expulsion Waiver* and the terms of the *District Behavior Contract*.

What follows is a description of the protocols, procedures and paperwork which comports with the School Board's requirements for documentation of each expulsion option. It is anticipated that the changes referred to above will significantly reduce the amount of paperwork required for processing student expulsions.

It is important to keep in mind the legal implications and the professional impressions associated with the quality of the paperwork submitted in this process. Thorough completion of all forms, accuracy in detail, timeliness of submission, and the inclusion of all required signatures are crucial to ensuring the expulsion process proceeds as expertly and expeditiously as possible. The importance of attending to these issues cannot be overstated.

Whatever is written by students, teachers, parents, and administrators will be closely scrutinized by the members of the School Board, the Superintendent, and the Executive Director of Secondary Education for both substance and clarity. The documents might also be examined by attorneys, hearing officers, investigators from the Office of Civil Rights, and judges at the state or federal level. It is imperative that all paperwork submitted be neat and legible.

A section of this manual is dedicated to the protocols required for processing an expulsion recommendation involving student receiving ESE services or 504 accommodations, identified as qualifying for ESE services or 504 accommodations, or as possibly being in need of ESE services or 504 accommodations. However, it is important to emphasize that the most critical requirement in the entire process of dealing with those situations is the convening of a **Student Study Team** (SST) meeting and the inclusion of the minutes of this meeting in the submitted expulsion packet.

Finally, keep in mind that this is an evolving process. Adjustments in specific protocols may be called for as feedback is received regarding the effectiveness and efficiency of these procedures. When revisions are required, replacement pages will be forwarded to each school.

GENERAL PROCEDURES

The following procedures are to be followed in the processing of any recommendation for expulsion:

1. **Initial Notification of the District Office:** Telephone notification to the Office of Secondary Education is to occur **immediately** after it has been determined that a student has committed an act warranting a recommendation for expulsion.

The school administrator in charge of the case should identify the:

- ❑ student's name
- ❑ student's grade
- ❑ name of school
- ❑ name of the administrator handling the case
- ❑ student's ESE or 504 status
- ❑ student's offense
- ❑ length of suspension
- ❑ principal's recommendation for expulsion
- ❑ length of expulsion
- ❑ target date for submitting the expulsion to the Board
- ❑ any other pertinent information related to the case.

Note: If a **Weapon** is involved in the incident, the principal is to immediately fax or hand deliver a picture or photocopy of the weapon to the Office of Secondary Education.

2. **Length of Suspension (Option A):** The duration of the out-of-school suspension that attaches to an Option **A** expulsion recommendation shall **prevent** the student from returning to school prior to the formal expulsion hearing before the School Board.

Note: The Office of Secondary Education must be contacted whenever it becomes necessary to extend a suspension beyond the 10 day maximum to prevent a student from returning to school prior to the School Board taking action on the expulsion recommendation.

3. **Length of Suspension (Option B):** Students recommended to apply to Project Excel will be contacted by the Project Excel staff within 48 hours of the Office of Secondary Education receiving confirmation from the principal that the *Expulsion Waiver* and *District Behavior Contract* have been signed. The student shall not return to the zoned school after these documents have been signed. This applies even if the term of the suspension that attached to the incident has been completed.

4. **Length of Suspension (Options C & D):** The duration of the suspension shall reflect the severity of the offense and conform to the Student Conduct and Discipline Code. The student may return to the zoned school or the alternative school site **immediately** after the *Expulsion Waiver* and *District Behavior Contract* have been signed by all the appropriate parties and the student has served the suspension that attached to the infraction.

5. **Confirmation of Recommendation to District Office:** The principal shall notify the Office of Secondary Education **immediately** after he/she has met with the student/parents to clarify the rationale for an Option **A** recommendation, or to sign the *Expulsion Waiver* and the *District Behavior Contract* for Options **B, C,** or **D**.

Note: The purpose of this contact is to confirm which expulsion option and accompanying documentation will be submitted to the School Board for action.

Note: Individual copies of all forms required for documentation should be distributed to the appropriate parties by the administration of the school making the expulsion recommendation.

6. **Submission of Expulsion Packet to the District Office:** The expulsion packet is to be submitted to the Office of Secondary Education after the necessary documentation has been compiled to process the expulsion recommendation.

Note: The timeliness of submission of Option **A** documentation is especially critical. These expulsion packets are due to the Office of Secondary Education by 12:00 p.m. on the Wednesday preceding the expulsion hearing.

7. **Notification of Official School Board Action:** The Office of Secondary Education will communicate the School Board's official disposition to parents, school, and alternative school sites. Telephone contact will be made immediately following the expulsion hearing. Written notification will be forwarded to the appropriate parties within 48 hours of the School Board's action.

WITHDRAWAL PROCEDURES/CODE

The following codes and procedures have been established for withdrawing a student who is recommended for expulsion.

Option A - Full Exclusion from Seminole County Public Schools

A *Final Order of Expulsion* from the office of Secondary Education will be distributed to:

Parent
School Expulsion Contact (to be shared with the data entry and guidance secretaries who will in turn enter a code of **W-21**).

(Note: The hearing date indicated on the Final Order will be the date to use for withdrawal.)

Option B - Recommendation to Excel

A *Letter of Notification* from the office of Secondary Education will be distributed to:

Parent
School Expulsion Contact (to be shared with the data entry and the guidance secretaries who will in turn enter a code of **W-02**)

(Note: The hearing date indicated on the Notification Letter will be the date to use for withdrawal.)

Note: If student does not apply to Project Excel or if he/she is dismissed from the program a *Final Order of Expulsion* will be distributed to: (Note: The indicated on the Notification Letter will be the date to use for withdrawal.)

Parent
School Expulsion Contact (to be shared with the data entry and the guidance secretaries who will in turn enter a code of **W-21**)

Option C - Recommendation to another Seminole County school

A *Letter of Notification* from the office of Secondary Education will be distributed to:

Parent
School Expulsion Contact of sending school (to be shared with the data entry and the guidance secretaries who will in turn enter a code of **W-02**)
School Expulsion Contact of receiving school (to be shared with data entry and guidance secretaries) Administration will be previously notified of recommendation.

(Note: The hearing date indicated on the Notification Letter will be the date to use for withdrawal.)

Option D - Return to Home School on *District Behavior Contract*

A *Letter of Notification* from the office of Secondary Education will be distributed to:

Parent
School Expulsion Contact (to be shared with guidance personnel in order for student to receive counseling. This is a significant event in a student's life.)

(Note: The hearing date indicated on the Notification Letter will be the date to use for withdrawal.)

The next two pages are sample copies of *The Letter of Notification* and *The Final Order of Expulsion.*

SEMINOLE COUNTY
PUBLIC SCHOOLS

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LETTER OF NOTIFICATION

Copy Sample

Dear Parent:

This letter is intended to inform you that the school Board of Seminole County, Florida, has approved the conditions of the Waiver of Out-of-School Expulsion and the District Behavior Contract you and your child agreed to earlier.

As long as your child continues to fulfill the terms of the waiver and contract, he/she may continue to attend the school to which he/she has been assigned under the terms of this agreement and the recommendation for expulsion will be held in abeyance. When your child has successfully completed the time requirement of the District Behavior Contract the expulsion recommendation will be expunged from his/her record.

I wish you good luck and genuinely hope that this, although a very troubling experience for your family, will be a life's lesson that positively serves your son/daughter in the future.

Sincerely,

Ronald L. Pinnell

Ronald L. Pinnell, Ed.D.
Assistant Director of Secondary Education

6-c

BEFORE THE SCHOOL BOARD OF SEMINOLE COUNTY, FLORIDA

Sample

PAUL J. HAGERTY, as Superintendent,

Petitioner, Expulsion 95-H

Respondent,

FINAL ORDER OF EXPULSION

This matter was heard before the **School Board of Seminole County, Florida**, on March 12, 1996, upon the recommendation of the Superintendent of Public Schools for Seminole County, Florida that JOHN DOE be expelled from Lake Howell High School and all Seminole County Public Schools for certain violations of the Student Conduct and Discipline Code, Sandy Robinson, presided.

Upon the record the School Board finds that JOHN DOE did on February 16 , 1996, violate the Student Conduct and Discipline Code by the commission of the following offense:

1. Possession of alcohol and marijuana.

THEREUPON IT IS HEREBY ORDERED AND ADJUDGED that JOHN DOE be expelled from Lake Howell High School and all Seminole County Public Schools **for the remainder of the 1995-96 school year.**

Dated at Sanford, Seminole County, Florida on March 13, 1996.

_____

Chairman

TROUBLE SHOOTING

Historically, there have been some reoccurring issues that have delayed the processing of expulsion packets. The following suggestions are offered to help prevent unnecessary delays in processing expulsion recommendations:

1. **Current Forms:** Make sure the forms used for processing any expulsion recommendation are the most current/revised forms available. The "Documentation Required" page provided in this manual for each expulsion option identifies the operative revision date of each form required to process that recommendation. If the forms are not current, the packet will be returned to the school for the transfer of the expulsion information to the appropriate forms.

2. **Required Signatures:** Be sure to double check all forms to confirm that each form has been signed by the appropriate individuals. The absence of all appropriate and required signatures on expulsion forms will result in the packet being returned to the school to obtain the missing signatures.

3. **Forms in Native Language:** Provide all ESOL students and their parents with an expulsion packet with forms written in English and duplicate forms that have been translated into their native language. An expulsion packet will be returned to the school if there is a question as to whether a student or a parent understands the English translation of the expulsion forms.

4. **Subjective Comments on Teacher Observation Sheets or Student Referral Forms:** Screen these forms for teacher comments that state that they (the teachers) believe a student needs professional help or that the student should be tested for emotional problems or that they believe the student has problems of this sort. This applies regardless of whether or not the student is presently staffed into an ESE program. An expulsion packet will be returned to the school if there is no evidence (SST minutes) that these concerns have been addressed by the school.

5. **Witness Statements Sworn to and Notarized:** Every individual who provides a witness statement must swear to the truth of his/her statement, sign and have the statement notarized by a certified Notary Public.

6. **Student Study Team Recommendations:** Be sure the expulsion packet submitted for an ESE student (excluding students staffed into the Gifted Program) includes the manifestation determination by the school's SST. This is absolutely required. Failure to include this documentation will immediately terminate the process until such a meeting is held and the recommendations of the **SST** are included in the expulsion packet.

FORMAL HEARINGS

Attendance by a school administrator who is familiar with the facts of a case and the rationale for a principal's expulsion recommendation is **required** at all formal hearings.

A formal hearing before the School Board is necessary under the following conditions:

1. **Principal's Expulsion Recommendation is for Full Exclusion From all Seminole County Public Schools** (Option **A**). A comprehensive expulsion packet must always be submitted for an Option **A** hearing.

2. **Refusal to Sign the Expulsion Waiver or a District Contract** (Options **B, C, & D**). Parent or student refusal to agree to each and all terms of the *Expulsion Waiver* and/or the *District Behavior Contract* requires the expulsion recommendation to be brought before the School Board for a formal hearing.

Note: The principal **does not** have to change the original expulsion recommendation under these conditions. However, a comprehensive packet (Option **A**) of documentation must be submitted instead of the truncated packet of documentation that is utilized for a Consent Agenda recommendation.

3. **Student Recommended to Project Excel a Second Time in the Student's Secondary School Career** (Option **B - 2X**). Any student who is recommended to Project Excel a **second** time **must** appear before the School Board for a formal hearing.

Note: This **requires** a comprehensive packet (Option **A**) of documentation be submitted **even if** the principal and the student/parents agree on the recommendation to Project Excel and would freely sign an *Expulsion Waiver* and a *District Behavior Contract*.

OUT-OF-SCHOOL EXPULSION WAIVERS AND DISTRICT BEHAVIOR CONTRACTS

There are three alternatives to recommending the exclusion of a student from all schools in Seminole County. Each of these expulsion options requires an *Expulsion Waiver* to be signed and a *District Behavior Contract* to be executed then submitted to the School Board for official action.

Expulsion Waivers and *District Behavior Contracts* should be processed in accordance with the procedures described below:

1. **Initial Notification:** The school site administrator in charge of a case shall make telephone notification to the Office of Secondary Education **immediately** after it is determined that a student has committed an act warranting a recommendation for expulsion. The administrator shall specify which expulsion contract (Option **B**, Option **C**, or Option **D**) will be recommended to the parents.

Note: If a **Weapon** is involved in the incident, the principal is to immediately fax or hand deliver a picture or photocopy of the weapon to the Office of Secondary Education.

2. **Parent Meeting:** The principal shall meet with the parents and the student to specify which expulsion option (Option **B, C,** or **D**) will be recommended to the School Board, to review the terms of the *Expulsion Waiver* and the *District Behavior Contract*, and to have them sign each document.

Note: An Option **C** recommendation requires the principal of the sending school to obtain authorization from the principal of the receiving school **prior** to such a contract offer being made to the student/parents.

3. **Expulsion Waiver and District Behavior Contract Signed:** Student/parents should be provided a copy of the *Expulsion Waiver* and the *District Behavior Contract* **immediately** after these documents have been signed.

The school should retain a copy of each of these documents and include the originals in the expulsion packet that is submitted to the Office of Secondary Education.

Note: Individual copies of all forms required for processing the expulsion recommendation should be immediately distributed to the appropriate parties at this meeting.

4. **Student Re-entry:** The student may re-enter the zoned school or an alternative school site once the *Expulsion Waiver* and *District Behavior Contract* have been signed by all the appropriate parties and the student has served the suspension that attached to the infraction. Students recommended to Project Excel will be contacted by the Project Excel staff to arrange for an interview for admission to the program.

5. **Confirmation:** The principal shall **immediately** notify the Office of Secondary Education to confirm that the *Expulsion Waiver* and the *District Behavior Contract* have been signed.

6. **Packet Submission:** Expulsion packets are to be submitted without delay to the Office of Secondary Education after the *Expulsion Waiver* and the *District Behavior Contract* have been signed by all the appropriate parties. The timeliness of this submission is critical.

7. **Consent Agenda:** The Office of Secondary Education will review each expulsion packet. Upon verification of the documentation, the case will be placed on a Consent Agenda for School Board action.

Note: It is not necessary for a school administrator, the parents, or the student be present when the School Board takes action on the Consent Agenda.

8. **Notification of Parties:** The Office of Secondary Education will communicate the School Board's official disposition to the student/parents, school, and alternative school sites. Telephone contact will be made within 24 hours following the expulsion hearing. Written notification will be forwarded within 48 hours.

PROJECT EXCEL

1. **Project Excel Description:** Project Excel is an educational placement made available to secondary students as an alternative to full exclusion from any and all schools in Seminole County. The School Board has indicated that a student should be granted the opportunity to attend the middle school Excel program and the high school Excel program only once in his/her school career.

2. **Who Recommends Placement at Excel?:** The principal in collaboration with the Office of Secondary Education determines that an Option **B** expulsion recommendation is appropriate.

Note: One semester will usually be considered the minimum length of time that a student may be recommended for placement in this program.

3. **District Contract to Project Excel Signed:** The principal arranges a meeting with the student/parents to explain the Option **B** recommendation and to obtain the signatures necessary to allow the student to make application to Project Excel.

Note: Individual copies of all forms required for processing the expulsion recommendation should be immediately distributed to the appropriate parties at this meeting.

Note: Official copies of the *Expulsion Waiver* and the *District Behavior Contract* are to be provided to the parents at the time these documents are signed.

4. **Confirmation of Recommendation to District Office:** The principal shall notify the Office of Secondary Education **immediately** after he/she has met with the student/parents to sign the *Expulsion Waiver* and the *District Behavior Contract* for Option **B**.

5. **Timing of Application to Excel Program:** The staff at Project Excel will contact the student/parents within 48 hours to arrange for the student to make application to the program. Parents should not attempt to contact Project Excel unless contact has not been made after 48 hours following the signing of the *Expulsion Waiver* and *District Behavior Contract.*

6. **Not Automatic:** The staff at Project Excel interviews, screens, and enrolls students into the program. Student/parents will be informed of the admission decision immediately after the determination has been made.

Note: Any student denied admission to Project Excel shall thereafter be excluded from attendance in any and all Seminole County Public Schools for the duration of the recommended expulsion.

7. **Excel Screening Requirements:** Student/parents will be required to agree to and sign a separate contract with Project Excel. This contract outlines the behavioral and academic expectations for placement in the program.

Note: Students are also required to undergo a drug evaluation as a precondition to acceptance to Project Excel. The student/parents are responsible for the cost of this evaluation. The Project Excel staff will provide clarification of the necessary components of this evaluation, and how the cost for this screening can be moderated.

8. **Transportation:** Transportation to Project Excel is provided to students enrolled in the program. The staff of Project Excel will communicate with the SCPS's Transportation Department to make these arrangements for each student.

SPECIAL ISSUES

1. **Repetitive Expulsions:** A policy of increasing severity of sanctions should be applied to students who have previously been expelled from any district school. Depending on the circumstances associated with each of the expulsion incidents, an expulsion recommendation for a student who has previously been expelled should, at the very least, move up to the next level of expulsion options.

2. **Zero Tolerance:** The School Board has adopted a policy, pursuant to state statute, which mandates a student be recommended for expulsion if he/she commits any of the following criminal acts while on School Board property, at a school function, or a school sponsored function:

   - homicide
   - sexual battery
   - armed robbery
   - aggravated battery
   - battery or aggravated battery on school personnel
   - kidnapping or abduction
   - arson
   - possession, use, or sale of any firearm, knife, any other weapon
   - possession, use, or sale of any explosive device
   - possession, sale, distribution, or being under the influence of any drug.

Expulsion Options - Depending on the circumstances surrounding the incident, the principal may recommend expulsion Option **A, B, C**, or **D**.

3. **Firearms / Explosive Devices:** A federal law, Gun-Free Schools Act of 1994 (GFSA), requires that a student who is determined to have brought a firearm or explosive on campus or to a school sponsored event be expelled from his/her zoned school for a period of not less than one calendar year (365 days). This same law also requires the student be referred to the criminal justice or juvenile delinquency system.

Expulsion Options - The GFSA does allow for a student to be expelled and recommended to an alternative school site. Therefore, depending on the circumstances surrounding the incident, a principal may recommend expulsion Option **A, B,** or **C**.

- The GFSA does not apply to BB guns, pellet guns, stun guns, knives, or firecrackers.

4. **Other Weapons**: A student found to have been in possession of or to have used any of the following weapons/devices on school board property, at a school function, or a school sponsored function shall be recommended for expulsion:

    - BB gun
    - pellet gun
    - stun gun
    - knife
    - pocket knife
    - pepper spray
    - tear gas
    - any other weapon

Expulsion Options - Depending on the circumstances surrounding the incident, the principal may recommend expulsion Option **A, B, C,** or **D.**

5. **Sale or Distribution of Drugs and Alcohol:** The School Board considers the sale and/or distribution of drugs and alcohol an egregious act which requires a more severe sanction than does simple possession or use of either substance.

Expulsion Options - The School Board will not consider an Option **C** or Option **D** recommendation for any offense involving the sale or distribution of drugs or alcohol. Depending on the circumstances, the principal may recommend either Option **A** or Option **B**.

6. **Possession, Use, or Being Under the Influence of Drugs or Alcohol:** The possession, use, or being under the influence of drugs or alcohol by a student is an expellable offense.

Expulsion Options - Depending on the circumstances, a principal may recommend any of the expulsion options available. However, it is anticipated that a first time offender with no significant discipline history will be recommended to return to his/her zoned school (Option **D**).

7. **Off-Campus Felony Acts**: *Florida Statutes* enable public school officials to suspend a student, and ultimately recommend the expulsion of a student, who is arrested for committing an off-campus felony act or a delinquent act which would be a felony if committed by an adult.

   A student may be **suspended** from school only after formal charges have been filed by the Office of the State Attorney **AND** after the principal has afforded the student a hearing at the school in keeping with his/her due process rights. However, pending such a hearing, the student may be **temporarily suspended** from school if the principal is concerned about the presence of the student being a disruptive influence on the orderly operation of the school.

   An **expulsion** recommendation can not be made until a student is found guilty of an off-campus felony act in a court of competent jurisdiction. By definition, a student is found guilty if he/she enters a plea of nolo contendere or guilty, or elects to go to trial and a jury returns a verdict of guilty.

   No expulsion recommendation may be brought forward by a principal if a trial court withholds adjudication in a case involving the arrest of a student for an off-campus felony act.

Expulsion Options - Depending on the circumstances surrounding the incident, the principal may recommend expulsion Option **A**, **B**, **C**, or **D**.

8. **Off-Campus Delinquent Acts**: The same expulsion procedures apply as noted immediately above if a student is found guilty of an off-campus delinquent act which would be a felony if committed by an adult.

Note: The *Florida Statutes* make no provision for the expulsion of a student arrested, found guilty, or who has adjudication withheld for an off-campus delinquent act that would not be classified as a felony if committed by an adult. A student, therefore, **may not** be expelled from the Seminole County Public Schools if arrested, prosecuted, and found guilty of such an off-campus delinquent act.

VIOLATION OF DISTRICT BEHAVIOR CONTRACT

The procedures outlined below apply to those situations where it is believed that a student has breached the terms of a *District Behavior Contract* after having been expelled and granted the opportunity to either attend another district school (Option **C**) or to re-enter their zoned school (Option **D**).

1. **Determination of Violation:** It must be determined that the student violated the terms of the *District Behavior Contract*. The student has the right to contest this determination by asking for a hearing before the School Board to address the singular issue of the contract violation.

Note: The student may **not** challenge the facts or the consequences of the original expulsion recommendation at this hearing. The student may only contest the allegation that he/she violated the terms of the contract.

2. **Options Available:** Option **A** or Option **B** may be considered as a follow-up recommendation to the original expulsion incident if it is determined that the student did violate his/her contract.

3. **Determination of Appropriate Sanction:** The principal and the Office of Secondary Education shall collaborate in making a recommendation to the School Board for imposition of a higher order sanction for the initial expulsion recommendation. The severity of the original infraction and the nature of the violation of the contract shall be assessed in making a case-by-case analysis for making a follow-up recommendation to the School Board.

4. **Procedures for Processing Follow-up Recommendations:** The procedure for processing a follow-up recommendation depends upon which expulsion option is being made to the School Board and the student/parents' response to that recommendation.

A. **Option A** - When the follow-up recommendation is full exclusion from all Seminole County Public Schools the student/parents shall be informed of the recommendation and asked to contact the Office of Secondary Education to confirm the anticipated date of the hearing.

Note: An Option **A** follow-up recommendation requires the same complete packet of documentation as described and outlined for an original recommendation for full exclusion.

B. Option B - When the follow-up recommendation is to give the student the opportunity to apply to Project Excel the student/parents shall be asked to sign the necessary documents to process this request at the school. The Office of Secondary Education shall be immediately notified after the documents are signed so arrangements for the Project Excel interview can be arranged.

The documents identified below shall be submitted when processing an Option B follow-up recommendation:

1. **Form 535** - Provide all information requested on the form.

2. **Form 644** - Provide all information requested. Identify the specific infraction that constitutes a breach of the student's contract. For clarification, also include a statement that declares the student broke the terms of a *District Behavior Contract*, and identify the original expellable infraction along with the corresponding date of the expulsion recommendation.

3. **Form 532** - Have student/parents sign another *Expulsion Waiver* that applies to the follow-up recommendation. The student/parents will be required to sign a contract at Project Excel if accepted to the program.

Note: The student/parents must be reminded that if Project Excel refuses to admit the student, then the student will be excluded from all Seminole County Public Schools for the time remaining on the original expulsion recommendation.

C. **Option B Refusal**: If the student/parents refuse to agree to an Option B follow-up recommendation, the matter will be scheduled for a hearing before the School Board. The only issue that will be open for discussion at this hearing will be that of the incident considered to be a violation of the contract.

The follow-up recommendation (Option B) made to the School Board does not have to change because of this refusal. However, the documentation required must correspond to that of an Option A expulsion recommendation.

REQUESTS FOR RE-HEARING

A student who is expelled and placed on a *District Behavior Contract* for a violation of the Student Conduct and Discipline Code may schedule a "Petition Hearing" before the School Board. However, Petition Hearings are limited in their scope and shall be granted only to addess the following issues:

1. **Lack of Understanding:** The student/parents assert that they did not understand the nature of the contract process when the *Expulsion Waiver* and the *District Behavior Contract* were signed.

2. **Coercion:** The student/parents assert that they were coerced or unreasonably pressured into signing the *Expulsion Waiver* and the *District Behavior Contract.*

3. **New Evidence:** The student/parents can provide new and incontrovertible evidence that demonstrates the charge underlying the contract is false.

Note: Petition Hearings are not de novo hearings of the original facts of the case. The sole purpose of a petition hearing is to establish whether or not the student should be granted a "Re-Hearing" for reconsideration of the original final order of expulsion.

If, after the Petition Hearing, the School Board finds that the request for reconsideration is reasonable and well founded, a Re-Hearing of the matter shall be scheduled for **another date** that provides adequate notice to both the student/parents and the school representatives.

A request for a Petition Hearing must be filed with the Office of the Superintendent not later than 4:00 P.M. on the 10th working day following the date of entry of the original final order of expulsion.

Note: Requests for Re-Hearings to change the original consequence or penalty imposed by the School Board will not be permitted.

EXCEPTIONAL STUDENT EDUCATION

EXPULSION PROCEDURES

STUDENTS WITH DISABILITIES
DISCIPLINARY PROCEDURES

Disciplinary action involving students with disabilities is subject to rules and limitations that are very different from those applicable to non-disabled students.

An expulsion recommendation for a student who receives any sort of **ESE** services (SLD, ED, EMD, Speech and Language, etc.) must conform with the parameters established under the Individuals with Disabilities Education Act (**IDEA**). This applies even if common sense would suggest a student's exceptionality is not reasonably related to the reason he/she is being recommended for expulsion.

The Supreme Court ruling in *Honig v. Doe* made it clear that a suspension in excess of 10 days constitutes a change in the educational placement of a student with disabilities. The Court went on in pertinent part to hold that suspensions in excess of 10 days automatically trigger the process established by law (IDEA) for a change in placement, modification of a student's Individualized Education Plan (IEP), and the student's entitlement to due process to challenge the proposed change.

An ESE student may be suspended immediately if the student committed an act which poses an immediate danger to students or staff members, or if the act is a physical assault or one which has an immediate disruptive effect upon the orderly operation of the school. This suspension may not be more than the time permitted by law for students receiving exceptional student education services (10 days). If a 10 day suspension is not adequate to protect the student, other students, or staff members from a violent student, an appeal must be made to a court of competent jurisdiction to obtain an injunction to prevent the student from returning to school.

A series of suspensions that are not separated by a significant amount of time and are associated with the same kind of misbehavior have consistently been characterized by the courts and the Office of Civil Rights as de facto expulsions. Suspension of an ESE student from transportation that results in that student's non-attendance has also been determined to be exclusion from school.

It is absolutely necessary and required that there be sufficient time between suspensions to allow for the interventions developed by the SST to be given a realistic chance to have an effect on the student's behavior. If not, an advocate for the student has viable grounds to assert that the student's rights of equal protection and due process rights have been violated. If such an assertion is upheld by a court of competent jurisdiction, both the school district and the individual(s) involved in the case are at risk of having monetary damages and lawyers fees assessed against them.

PROCESSING EXPULSION RECOMMENDATIONS STUDENTS WITH DISABILITIES

A description of the procedures which fulfill the legal requirements for processing a recommendation for the expulsion of a student with disabilities follows below:

1. **First Suspension:** Student misconduct leading to a student's first suspension requires the principal to complete a Notice of School Suspension (**Form 542**). A copy of this form is to be furnished to the Staffing Resource Specialist serving that school.

   A student's first suspension does not require a meeting of, discussion by, or action to be taken by the Student Study Team (SST). This group may meet, however, if circumstances suggest it would be prudent for the **SST** to review the student's misbehavior connected with the initial suspension.

2. **Second Suspension:** Student misconduct leading to a student's second suspension requires the principal to complete a Notice of School Suspension (**Form 542**). A copy of this form is to be furnished to the Staffing Resource Specialist serving that school.

Note: The ESSS **Zone Administrator** who serves the school should be **immediately** notified when a student who receives IDEA services or 504 modifications is assigned a second out-of-school suspension.

The student should be placed on the agenda of the next SST meeting. Parents shall be given adequate notice of the date and time of this meeting, as well as an invitation to attend. The date and time of the SST meeting must be reasonably convenient for the parent(s) to attend.

Note: The SST meeting **must** be rescheduled if the parents advise they cannot attend. However, if the parents fail to attend the SST meeting after it has been rescheduled, the SST shall invite the parents to the third scheduled meeting and shall convene the SST meeting with or without the parents being in attendance. *24*

The SST shall review the incident leading to the student's second suspension. The team will also develop suitable interventions in an effort to prevent any further suspension of the student from school. Discussion should include, but is not limited to:

- review of the student's records, including the confidential cum, medical and discipline records, and report cards
- review the original rationale for program placement
- determine if the behavior is a manifestation of the student's disability (**this determination is absolutely required**)
- determine if the 3 year assessment is due (complete it as part of the interventions if it is due)
- determine specific interventions.

Note: The IEP **must** be amended to reflect the implementation of any interventions developed by the SST. The parents may challenge the change in the IEP by requesting a due process hearing.

The Staffing Resource Specialist shall forward a copy of **Form 511** to the Zone Administrator who serves that school. The minutes of the SST meeting should include the following information:

- discussion - information reviewed by the SST, such as the rationale for program placement, previous interventions, and evaluations
- consideration given to information - comments addressing the validity or reliability of the evaluation instruments used
- rationale for SST decisions - document the decision making process, clarify reasons for acceptance or rejection of evaluation data.

Note: Parents who fail to attend the SST meeting must be given a minimum of 5 working days notice prior to the implementation of any interventions that change a student's IEP. The parents may challenge the change in the IEP by requesting a due process hearing.

Note: A request for a due process hearing by the parents does not cancel or rescind a student's suspension.

3. **Third Suspension:** Student misconduct leading to a student's third suspension requires the principal to complete a Notice of School Suspension (**Form 542**). A copy of this form is to be furnished to the Staffing Resource Specialist serving that school.

   Students receiving ESE services may be recommended for expulsion after the third suspension only if the incident, in and of itself, is an expellable offense. Additionally, no disabled student may be recommended for expulsion without a meeting of the SST.

Note: Students receiving ESE services may **not** be recommended for expulsion simply because they have accumulated 3 suspensions.

Note: The ESSS **Zone Administrator** who serves the school should be **immediately** notified when a student who receives IDEA services or 504 modifications is assigned a third out-of-school suspension.

After the suspension has been initiated, the principal or designee will place the student on the agenda of the next SST meeting. Parents shall be given adequate notice of the date and time of this meeting, as well as an invitation to attend.

Note: If the SST determines the student to be a **real danger** to himself/herself or others, the school district may seek injunctive relief from a court of competent jurisdiction to prevent the student from returning to his/her school of regular attendance. If this is effected, educational services to the student may not be suspended for more than 10 days and the school must provide services under a temporary IEP pending the development of a new IEP by the presiding judge.

Misbehavior a Manifestation of the Student's Disability:
The SST shall review the incident that led to the student's third suspension, previous incidents, previous file reviews, and interventions with the parent. If the SST, including the parent if possible, judges the misbehavior to be a manifestation of the student's disability, then the expulsion recommendation must be terminated.

The SST shall then make recommendations regarding the conditions under which the student returns to school. These may include, but are not limited to:

- a behavioral contract
- restrictions on the student's movement in the zoned school
- increase in hours in exceptional education
- transfer to another district school
- change in placement
- a more restrictive placement

The implementation of any of these recommendations will necessitate the development of a new IEP and/or the development of a behavior plan.

Misbehavior a Manifestation - Alternative School Placement:
Whenever the SST recommends a more restrictive placement at an Alternative School site, the following procedures shall be followed:

1. Parents shall be given a copy of their procedural safeguards and sign the bottom of the **Form 511** after the determination of the SST is recorded on the form.

2. The Zone Administrator shall **immediately** notify the Office of Secondary Education of the determination.

3. The Zone Administrator shall inform the principal of the sending school of the SST's determination.

4. The Zone Administrator shall **immediately** notify and then deliver the necessary files and records to the Zone Administrator serving Project Excel.

5. The SST at Project Excel will review the student's file and cum folder to recommend placement at either Project Excel or the PAI program at Rosenwald ESE Center.

Note: Parents have the right to challenge a manifestation determination or to challenge a change in program placement by requesting a due process hearing under FAC 6A.03311.

"Stay Put" Rule: Whenever a due process hearing is requested, the "Stay Put" rule applies. This rule does not rescind or invalidate the student's suspension. However, it does mandate the student be allowed to return to the school of regular attendance at the conclusion of the suspension. The "Stay Put" rule also requires that the student remain in his/her present placement until all legal remedies are exhausted, unless permission is obtained by a court of competent jurisdiction for the removal of the student pending the completion of all legal proceedings.

If a student's parents disagree with the disciplinary strategies suggested by the SST, then upon written parental request, a due process hearing will be scheduled pursuant to the provisions of applicable laws and regulations. If a due process hearing is requested, the expulsion recommendation must be discontinued until the due process procedure has been completed. Under the "Stay Put" rule, the child must remain in his/her placement unless court permission has been obtained to extend the suspension.

Both the parents and the student have the right to have legal counsel and representation, the right to present witnesses, and the right to present a statement in the student's defense at the expulsion hearing. Failure of the parents to appear before the School Board during the expulsion hearing shall be deemed a waiver of the student's right to a hearing, unless the student is 18 years of age or older.

Fourth Suspension: Students receiving ESE services may be recommended for expulsion after the fourth suspension only if the incident, in and of itself, is an expellable offense. Student misconduct leading to a student's fourth suspension requires the same procedures be followed that apply to processing a student's third suspension.

Note: Students receiving ESE services may **not** be recommended for expulsion simply because they have accumulated 4 or more suspensions.

Note: The same due process procedures apply to students who qualify for protection under Section 504 of the Rehabilitation Act of 1973.

Misbehavior Not a Manifestation of the Student's Disability:
If the SST determines that a student's misbehavior is not a manifestation of his/her disability, then the expulsion recommendation (Option **B, C,** or **D**) may proceed according to the same procedures outlined for non-disabled students.

Note: According to federal law, a student who receives IDEA services may not be fully excluded from a school district. Therefore, Option **A** cannot be recommended as an expulsion alternative.

The following procedures must also be followed:

1. Parents shall be given a copy of their procedural safeguards and sign the bottom of the **Form 511** after the determination of the SST is recorded on the form.

2. The Staffing Resource Specialist shall forward a copy of **Form 511** to the Zone Administrator who serves that school.

3. The principal shall review the expulsion packet with the Zone Administrator

4. The principal will meet with the parents to explain the rationale for the expulsion recommendation.

Note: Parents have the right to challenge the manifestation determination by requesting a due process hearing under FAC 6A.03311.

5. The principal shall forward the expulsion packet to the Office of Secondary Education.

6. The Zone Administrator shall immediately notify and deliver the necessary files and records to the Zone Administrator serving Project Excel.

Mainstreaming From the Program for Alternative Intervention (P.A.I.): The students will work in a three-level behavior management system designed so students can earn their way back to the regular school on a mainstreaming basis. A student who reaches the top level of the system and has been enrolled in P.A.I. at least nine weeks, would be mainstreamed one day at a time. Students with zero tolerance offenses who have reached the top level of the system would only be mainstreamed with the approval of the Office of Secondary Education. After the first day of mainstreaming, additional days would be earned based on student performance. Termination of mainstreaming would be by recommendation of the receiving school. Transition services and consultation would be provided by Rosenwald. P.A.I students will be mainstreamed to their home schools.

Students enter P.A.I. because of behavioral problems that are a manifestation of their disabilities.

SEMINOLE COUNTY PUBLIC SCHOOLS
Exceptional Student Support Services

HOW TO MAKE A MANIFESTATION DETERMINATION

We must determine if there is a relationship between the incident and the handicapping condition or if the incident could be a result of an improper placement.

THE STUDENT STUDY TEAM SHOULD BE COMPRISED OF THE FOLLOWING: psychologist, staffing resource specialist, zone administrator, parent, school administrator, ESSS and regular education teacher[s] as appropriate.

THE STUDENT STUDY TEAM SHOULD REVIEW THE FOLLOWING INFORMATION:

Initial Disability Evaluation

708's
Initial evaluation information used for placement including specific descriptions of original behavior

Specialists reports

Any private evaluations [DSM IV diagnosis]
Medical
Counseling information

Current information [concentrate on last two years]

Any three year evaluations
Information from parent conferences
Recent teacher conferences or observations
Attendance
Report cards
Court system involvement
Major disruptions in the environment
School history [as appropriate]

Anecdotal/ historical records of behavior

Discipline file:
—Pattern of behavior: Under what circumstances are the behaviors occurring?
—Frequency
—Consequences that have been used
Is this behavior typical of similarly classified students of the same age group?

Current IEP

History of the service of delivery
Intervention techniques and instructional approach based on the IEP or used in the classroom
Home/ school communications
Behavioral needs addressed through the IEP
General progress of IEP goals and objectives
Is the level of service still appropriate?

MAK:smcc

STUDENT TO BE EXCLUDED FROM ALL SEMINOLE COUNTY PUBLIC SCHOOLS

OPTION A

This expulsion option is to be recommended when, in the judgment of the zoned school principal, a student who committed an expellable offense threatens the integrity of Seminole County Public Schools or the safety of the offending student or other students in the school district.

Option **A** is the only expulsion recommendation that requires the submission of a comprehensive packet. It is absolutely necessary to include a copy of the discipline referral associated with the specific incident leading to the recommendation. Moreover, if an incident requires the use of student witness statements, then these statements must be included in the packet. Due process also requires a copy of the written statement of the student who is being recommended for expulsion to be included in the expulsion packet.

Teacher Observation sheets must be completed and submitted in the comprehensive expulsion packet by each of the student's teachers. It is essential that these observations be written in objective terms that document observations and not include subjective narrative or speculative commentary on the part of a teacher.

Refer to the subsection in this manual that outlines the procedures for processing an expulsion recommendation that requires a Formal Hearing.

The documentation required to process an Option **A** expulsion recommendation is presented on the page that follows. It is essential that each form be included in the expulsion packet.

DOCUMENTATION REQUIRED

OPTION A

The documentation listed below must be submitted to the Office of Secondary Education in order to process an Option A expulsion recommendation. This page may be used as a checklist to ensure all required documents are accounted for.

- ☐ **Form 535 (rev. 2/95)** - Student Expulsion Information & Summary
- ☐ **Form 644 (rev. 7/94)** - Principal's Recommendation for Expulsion
- ☐ **Form 955 (rev. 10/95)** - Student Discipline Incident Summary
- ☐ **Form 835 (rev. 7/94)** - Student Discipline Referral
- ☐ **Form 954 (rev. 7/94)** - Student Discipline Witness Statements
- ☐ **Form 472 (rev. 7/94)** - Teacher Observations
- ☐ **Student's Discipline Record** - All Discipline Referrals for the Year
- ☐ **Student's Criminal History**
- ☐ **Student's Attendance Report**
- ☐ **Copy of Student Report Card**
- ☐ **Student Academic History**
- ☐ **A photocopy of any weapon involved in an expulsion incident.**

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT EXPULSION INFORMATION and SUMMARY

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE _____ **SEX/RACE** _____

This student is recommended for:

_____ **A.** **Expulsion** from all Seminole County Public Schools until _____ .

_____ **B.** **Expulsion** with assignment **Project Excel** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

_____ **C.** **Expulsion** with assignment **Another District School** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

_____ **D.** **Expulsion** with reentry to **Present School of Attendance** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

Is this child presently enrolled in **IDEA**? ☐ Yes ☐ No **If yes, identify program** _____

Is this child presently being screened or evaluated for services under **IDEA/Section 504**? ☐ Yes ☐ No **If yes, identify guidance counselor** _____

Is this child presently receiving **ESOL** Services? ☐ Yes ☐ No

Has this student received a packet in his/her primary language? ☐ Yes ☐ No

Have the parents received a packet in their primary language? ☐ Yes ☐ No

_____ _____

PRINCIPAL/PRINCIPAL'S DESIGNEE **DATE**

SCS FORM 535 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

PRINCIPAL'S RECOMMENDATION FOR EXPULSION

TO: _____ **DATE:** _____

_____ **STUDENT** _____

_____ **STUDENT ID#** _____

Based on an investigation by my administrative staff, I have determined that your child, _____, has committed a violation of Section _____ of the Student Conduct and Discipline Code by doing the following act(s): _____

_____

_____

_____

Because of the seriousness of the violation, I am recommending to the Superintendent that your child be expelled from the public schools of Seminole County, Florida. You are hereby notified that your child has been suspended from school. The suspension started on _____ and will end on _____ unless it is extended by the Superintendent. During this suspension and any suspension extension by the Superintendent and pending any expulsion proceedings, your child is not to be on the campus of any Seminole County Public School and is not permitted to participate in any school activity, including attendance at any athletic or other event until the suspension is ended. Failure to comply with the suspension may result in your child being arrested for trespassing. The Superintendent's office will notify you if the suspension is extended and furnish information of any further action in the matter. If you have any questions, please contact the Office of Secondary Education, Seminole County Public Schools.

_____ _____

PRINCIPAL **DATE**

I HEREBY CERTIFY THAT ON _____ I ☐ MET WITH THE STUDENT'S PARENTS

☐ ATTEMPTED TO MEET WITH THE STUDENT'S PARENT(S)/GUARDIAN(S) TO DISCUSS THE CHARGES, THE EVIDENCE IN SUPPORT OF THE CHARGES, AND THE STUDENT'S RIGHT TO A FACT FINDING HEARING BEFORE THE SCHOOL BOARD.

_____ _____

PRINCIPAL OR DESIGNEE **DATE**

SCS FORM 644 (Rev. 11/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE INCIDENT STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

INVESTIGATING ADMINISTRATOR **DATE**

I HAVE READ THE ABOVE INCIDENT STATEMENT AND DISCUSSED IT WITH _____

I ☐ **AGREE** ☐ **DISAGREE WITH THE STATEMENT**

_____ _____

STUDENT'S SIGNATURE **DATE**

_____ _____

WITNESS **DATE**

On the _____ day of _____ 19____, the pupil was orally advised of the charge(s), was given an explanation of the evidence supporting the charge(s), and was given an opportunity to relate his/her version of the facts relating to the charge(s).

_____

PRINCIPAL'S SIGNATURE

SCS FORM 955 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS, FLORIDA

INCIDENT REPORT
STUDENT DISCIPLINE REFERRAL

Incident # _____
Obtain number from on-line system

TUDENT NAME: _____ ESE: ____ GRADE:_____ TEAM#: _____

TUDENT NUMBER: _____ REFERRED BY: _____

cident: Date: ____/____/____ Time: _____ Period: ____ Location: _____

ıcident Type: *(Select only one. If more than one type occurred, select only the most serious infraction)*

___ (01) Cheating
___ (02) Disobeying Bus Safety Procedures
___ (03) Disobeying School Procedures
___ (04) Disrespect/Insubordinate/Lying
___ (05) Disturbing Class/Disorderly Conduct
___ (06) Dress Code Violation
___ (07) Eating/Drinking On School Bus
___ (08) Fighting
___ (09) Larceny/Theft/Stealing
___ (10) Leaving Campus
___ (11) Leaving Class
___ (12) Missing Detention
___ (13) Missing Saturday School
___ (14) Missing In-School Suspension
___ (15) Persistent Tardies #_____
___ (16) Possession Of Tobacco
___ (17) Profanity
___ (18) Skipping Class
___ (19) Trespassing
___ (20) Truancy
___ (21) Vandalism/Damaging Property
___ (30) Other (Describe in Comments Section below)

OMMENT(S): _____

VITNESS(ES): _____

EACHER DISPOSITION (Prior to Current Referral):

___ Conference with Student
___ Parent Contact ____/____/____ Date
___ Referral to Guidance
___ Class Detention
___ Parent Conference ____/____/____ Date
___ Other _____

COMMENT(S): _____

ADMINISTRATIVE DISPOSITION: *(Select up to Three Actions)*

___ (01) Conference With Student
___ (02) Telephone Call To Parent(s)
___ (03) Letter To Parent(s)
___ (04) Parent Conference Requested
___ (05) Referral To Guidance
___ (06) Saturday School
___ (07) Detention
___ (08) Bus Suspension
___ (09) In-School Suspension
___ (10) Out-of-School Suspension
# of Days _____
Beginning ____/____/____
Return ____/____/____
___ (11) Recommended For Dropout Prevention
___ (12) Law Enforcement Intervention (Court/JDC)
___ (13) Referred To School Resource Officer
___ (14) Involvement By Principal
___ (15) In-House Contract
___ (16) School Board Contract
___ (17) Bus Warning/Probation
___ (18) Recommended For Bus Expulsion
___ (19) Recommended For School Expulsion
___ (20) Expelled From School Without Educational Support
___ (21) Expelled From School With Educational Support
___ (22) Other _____
___ Reported To Police
___ Narcotics Involved
___ Alcohol Involved
___ Gang Related
___ Weapon

COMMENT(S) : _____

PARENT NAME: _____ PHONE NUMBER (H) _____ (W) _____

STUDENT SIGNATURE: _____ DATE: ____/____/____ TIME: _____

PARENT SIGNATURE: _____

ADMINISTRATOR SIGNATURE: _____ ADMIN. #: _____ DATE: ____/____/____

SCS FORM 835 (Rev. 07/94) *DISTRIBUTION*: (1) School (2) Student/Parent (3) Referrer (4) [illegible]

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE WITNESS STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

NAME OF WITNESSES (PLEASE PRINT OR TYPE) _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

SIGNATURE OF WITNESS **DATE**

_____

TYPED OR PRINTED NAME OF WITNESS

STATE OF FLORIDA
COUNTY OF SEMINOLE

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ , 1995, BY _____ WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____ .

_____

NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____

TYPE OR PRINT NOTARY'S NAME HERE (NOTARY SEAL)

MY COMMISSION EXPIRES _____

THIS STATEMENT MUST BE LEGIBLE. IF THE WITNESS' HANDWRITING IS NOT LEGIBLE, THE STATEMENT MUST BE ACCOMPANIED BY A TYPED OR PRINTED COPY, WHICH MUST BE SIGNED BY THE STUDENT.

SCS FORM 954 (Rev. 10/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

TEACHER'S OBSERVATION OF STUDENT

PLEASE TYPE OR WRITE IN BLACK INK ONLY. This evaluation will be reproduced for the School as information for the possible expulsion of the student.

Name of School _____ Date _____ (M/D/Y)

Student's Name _____ S/R _____ Grade _____

Teacher's Name _____ Subject _____

Attendance Record (as of _____) Days Present _____ Days Absent _____ Tardies _____

1. Does this student pay attention in class? Always _____ Sometimes _____ Never _____

2. Does this student have a cooperative attitude and a desire to learn? Yes _____ No _____

3. If the student's attitude is not desirable, please indicate the characteristic(s) that best describe(s) his/her attitude or behavior: **surly** _____ **rude** _____ **indifferent** _____ **belligerent** _____ **prankish** _____ **other** _____

4. Is this student in any way a discipline problem? Always _____ Sometimes _____ Never _____

5. Have you noticed any change in this **student's attitude** and **work habits** since the beginning of the school year or semester? Yes _____ No _____

PLEASE COMMENT ON ANY CHANGE YOU HAVE NOTICED OR ANY DISCIPLINE PROBLEMS YOU HAVE HAD WITH THIS STUDENT:

_____

_____

_____

_____

_____

_____

_____

Please return to _____ on or before _____ (M/D/Y)

SCS FORM 472 (Rev. 10/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

DISTRICT CONTRACT TO HOLD EXPULSION IN ABEYANCE AND APPLICATION TO RE-ENROLL IN PROJECT EXCEL

OPTION B

Option **B** is reserved for recommending secondary school students (6th-12th grade) for an alternative school environment under the terms of an *Expulsion Waiver* and a *District Behavior Contract* in lieu of complete disengagement from all Seminole County Public Schools

This expulsion option is to be recommended when, in the judgment of the zoned school principal, a student who committed an expellable offense would threaten the integrity of the zoned school or safety of the offending student or other students at the zoned school. An Option **B** recommendation is also appropriate when, in the judgment of the zoned school principal, the interests of the school district and the expelled student would be best served by placement of the student in Project Excel, rather than being fully disengaged from Seminole County Public Schools.

The exercise of this option is preconditioned upon the understanding of the zoned school principal, the parent, and the student that:

- the expelled student would pose no threat to the integrity of this alternative district school or to the safety of the offending student or to other students at Project Excel.
- the Project Manager of Project Excel will screen all students recommended to the program and has the authority to deny admission to any student who does not meet eligibility criteria for admittance
- availability of this option is predicated upon space

The documentation required to process an Option **B** expulsion recommendation is presented on the following page. It is essential that each form be included in the expulsion packet.

DOCUMENTATION REQUIRED

OPTION B

The documentation listed below must be submitted to the Office of Secondary Education in order to process an Option **B** expulsion recommendation. This page may be used as a checklist to ensure all required documents are accounted for.

- ❑ **Form 535 (rev. 2/95)** - Student Expulsion Information & Summary
- ❑ **Form 644 (rev. 7/94)** - Principal's Recommendation for Expulsion
- ❑ **Form 532 (rev. 2/95)** - Out-of-School Expulsion Waiver
- ❑ **Form 955 (rev. 10/95)** - Student Discipline Incident Summary
- ❑ **Form 835 (rev. 7/94)** - Student Discipline Referral
- ❑ **Form 954 (rev. 7/94)** - Student Discipline Witness Statements
- ❑ **Form 511 (rev. 8/93)** - SST Minutes for ESE or Section 504 Students
- ❑ **District Behavior Contract**
- ❑ **A photocopy of any weapon involved an the expulsion incident.**

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT EXPULSION INFORMATION and SUMMARY

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE _____ **SEX/RACE** _____

This student is recommended for:

_____ **A.** **Expulsion** from all Seminole County Public Schools until _____.

_____ **B.** **Expulsion** with assignment **Project Excel** under the terms of this Expulsion Waiver and a District Behavior Contract until _____.

_____ **C.** **Expulsion** with assignment **Another District School** under the terms of this Expulsion Waiver and a District Behavior Contract until _____.

_____ **D.** **Expulsion** with reentry to **Present School of Attendance** under the terms of this Expulsion Waiver and a District Behavior Contract until _____.

Is this child presently enrolled in **IDEA**? ☐ Yes ☐ No **If yes**, identify program _____

Is this child presently being screened or evaluated for services under **IDEA/Section 504**? ☐ Yes ☐ No **If yes**, identify guidance counselor _____

Is this child presently receiving **ESOL** Services? ☐ Yes ☐ No

Has this student received a packet in his/her primary language? ☐ Yes ☐ No

Have the parents received a packet in their primary language? ☐ Yes ☐ No

_____ _____

PRINCIPAL/PRINCIPAL'S DESIGNEE **DATE**

SCS FORM 535 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

PRINCIPAL'S RECOMMENDATION FOR EXPULSION

TO: _____ **DATE:** _____

_____ **STUDENT** _____

_____ **STUDENT ID#** _____

Based on an investigation by my administrative staff, I have determined that your child, _____, has committed a violation of Section _____ of the Student Conduct and Discipline Code by doing the following act(s): _____

_____

_____

_____

Because of the seriousness of the violation, I am recommending to the Superintendent that your child be expelled from the public schools of Seminole County, Florida. You are hereby notified that your child has been suspended from school. The suspension started on _____ and will end on _____ unless it is extended by the Superintendent. During this suspension and any suspension extension by the Superintendent and pending any expulsion proceedings, your child is not to be on the campus of any Seminole County Public School and is not permitted to participate in any school activity, including attendance at any athletic or other event until the suspension is ended. Failure to comply with the suspension may result in your child being arrested for trespassing. The Superintendent's office will notify you if the suspension is extended and furnish information of any further action in the matter. If you have any questions, please contact the Office of Secondary Education, Seminole County Public Schools.

_____ _____

PRINCIPAL **DATE**

I HEREBY CERTIFY THAT ON _____ I ☐ MET WITH THE STUDENT'S PARENTS

☐ ATTEMPTED TO MEET WITH THE STUDENT'S PARENT(S)/GUARDIAN(S) TO DISCUSS THE CHARGES, THE EVIDENCE IN SUPPORT OF THE CHARGES, AND THE STUDENT'S RIGHT TO A FACT FINDING HEARING BEFORE THE SCHOOL BOARD.

_____ _____

PRINCIPAL OR DESIGNEE **DATE**

SCS FORM 644 (Rev. 11/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

WAIVER OF IMPOSITION OF OUT-OF-SCHOOL STUDENT EXPULSION

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE ____ **SEX/RACE** _____

UNDERSTANDING AND WAIVERS

I agree that I have been given a copy of the expulsion packet resulting from my act of misconduct on _____. I admit that I committed the act(s) charged in the expulsion packet and that those acts violate the Student Conduct and Discipline Code. I understand that the School Board will be asked to expel me for my misconduct and that I can be expelled for the remainder of the school year and all of the next school year. Instead of imposing that penalty, I understand the following will happen if I sign this agreement:

1. I waive my right to a School Board hearing on my recommended expulsion and the penalty for this discipline violation.

2. I will be **expelled** by the School Board for my discipline violation but the expulsion will be held in **abeyance**, and will be completely **expunged** from all school records upon completion of the attached **District Behavior Contract** on _____.

3. I will return to my school or an alternative school assignment under the provisions of the attached **District Behavior Contract**.

4. That if **Project Excel** is being recommended as an alternative school assignment that this agreement provides the student only with the opportunity to make application to the program. Admission to **Project Excel** is contingent upon the results of a screening process coordinated by the Project Manager.

5. If denied admission to **Project Excel**, I shall thereafter be excluded from attendance in any and all Seminole County Public Schools for the duration of the expulsion recommendation.

6. I I violate any terms of the **District Behavior Contract**, I may be immediately suspended from school by the principal and the Superintendent will ask the School Board to implement the **Expulsion** which has been held in **abeyance**, upon a finding that I violated the contract.

7. That I will only be entitled to a hearing on the issue of the violation of the contract.

8. **That this agreement has been entered into freely and voluntarily with full knowledge of its provisions, implications, and consequences for violation.**

_____ _____

Student Signature **Parent Signature**

Date _____ **Date** _____

_____ _____

Principal's Signature **Date**

SCS FORM 532 (Rev. 11/95) Office of Secondary Education - White Copy Parent - Yellow Copy School Cost Center - Pink Copy

BEST COPY AVAILABLE

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE INCIDENT STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

INVESTIGATING ADMINISTRATOR **DATE**

I HAVE READ THE ABOVE INCIDENT STATEMENT AND DISCUSSED IT WITH _____

I ☐ **AGREE** ☐ **DISAGREE WITH THE STATEMENT**

_____ _____

STUDENT'S SIGNATURE **DATE**

_____ _____

WITNESS **DATE**

On the _____ day of _____ 19 ____ , the pupil was orally advised of the charge(s), was given an explanation of the evidence supporting the charge(s), and was given an opportunity to relate his/her version of the facts relating to the charge(s).

_____

PRINCIPAL'S SIGNATURE

SCS FORM 955 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS, FLORIDA

INCIDENT REPORT
STUDENT DISCIPLINE REFERRAL

Incident # _____
Obtain number from on-line system

TUDENT NAME: _____ ESE: ____ GRADE:_____ TEAM#: _____

TUDENT NUMBER: _____ REFERRED BY: _____

ncident: Date: ___/___/___ Time: _____ Period: ____ Location: _____

ncident Type: *(Select only one. If more than one type occurred, select only the most serious infraction)*

___ (01) Cheating
___ (02) Disobeying Bus Safety Procedures
___ (03) Disobeying School Procedures
___ (04) Disrespect/Insubordinate/Lying
___ (05) Disturbing Class/Disorderly Conduct
___ (06) Dress Code Violation
___ (07) Eating/Drinking On School Bus
___ (08) Fighting
___ (09) Larceny/Theft/Stealing
___ (10) Leaving Campus
___ (11) Leaving Class
___ (12) Missing Detention
___ (13) Missing Saturday School
___ (14) Missing In-School Suspension
___ (15) Persistent Tardies #_____
___ (16) Possession Of Tobacco
___ (17) Profanity
___ (18) Skipping Class
___ (19) Trespassing
___ (20) Truancy
___ (21) Vandalism/Damaging Property
___ (30) Other (Describe in Comments Section below)

COMMENT(S): _____

_____

_____

WITNESS(ES): _____

TEACHER DISPOSITION (Prior to Current Referral):

___ Conference with Student
___ Parent Contact ___/___/___ Date
___ Referral to Guidance
___ Class Detention
___ Parent Conference ___/___/___ Date
___ Other _____

COMMENT(S): _____

_____

ADMINISTRATIVE DISPOSITION: *(Select up to Three Actions)*

___ (01) Conference With Student
___ (02) Telephone Call To Parent(s)
___ (03) Letter To Parent(s)
___ (04) Parent Conference Requested
___ (05) Referral To Guidance
___ (06) Saturday School
___ (07) Detention
___ (08) Bus Suspension
___ (09) In-School Suspension
___ (10) Out-of-School Suspension
# of Days _____
Beginning ___/___/___
Return ___/___/___
___ (11) Recommended For Dropout Prevention
___ (12) Law Enforcement Intervention (Court/JDC)
___ (13) Referred To School Resource Officer
___ (14) Involvement By Principal
___ (15) In-House Contract
___ (16) School Board Contract
___ (17) Bus Warning/Probation
___ (18) Recommended For Bus Expulsion
___ (19) Recommended For School Expulsion
___ (20) Expelled From School Without Educational Support
___ (21) Expelled From School With Educational Support
___ (22) Other _____
___ Reported To Police
___ Narcotics Involved
___ Alcohol Involved
___ Gang Related
___ Weapon

COMMENT(S) : _____

_____

_____

PARENT NAME: _____ PHONE NUMBER (H) _____ (W) _____

STUDENT SIGNATURE: _____ DATE: ___/___/___ TIME: _____

PARENT SIGNATURE: _____

ADMINISTRATOR SIGNATURE: _____ ADMIN. #: _____ DATE: ___/___/___

SCS FORM 835 (Rev. 07/94) *DISTRIBUTION:* (1) School (2) Student/Parent (3) Referrer (4) [illegible]

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE WITNESS STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

NAME OF WITNESSES (PLEASE PRINT OR TYPE) _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

SIGNATURE OF WITNESS **DATE**

_____

TYPED OR PRINTED NAME OF WITNESS

STATE OF FLORIDA
COUNTY OF SEMINOLE

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ , 1995, BY _____ WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____ .

_____

NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____

TYPE OR PRINT NOTARY'S NAME HERE (NOTARY SEAL)

MY COMMISSION EXPIRES _____

THIS STATEMENT MUST BE LEGIBLE. IF THE WITNESS' HANDWRITING IS NOT LEGIBLE, THE STATEMENT MUST BE ACCOMPANIED BY A TYPED OR PRINTED COPY, WHICH MUST BE SIGNED BY THE STUDENT.

SCS FORM 954 (Rev. 10/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

11/28/1995 09:55 4078315892 SOUTH SEMINOLE MS PAGE 02

SEMINOLE COUNTY PUBLIC SCHOOLS
EXCEPTIONAL STUDENT EDUCATION
MEETING SUMMARY SHEET

Student _____ Date of Birth _____

School _____ Meeting Date _____

Reason for Referral _____

_____

Comments/Recommendation _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

I hereby acknowledge receipt of my procedural safeguards. My questions about the contents have been answered _____
(Parent initial)

Persons in Attendance

_____ School Administrator	_____ Teacher	_____ Teacher
_____ Psychologist	_____ Guidance	_____ Nurse
_____ Staffing Specialist	_____ Social Worker	_____ Parent
_____ Other		

SCS Form 511 R[8/93] White: Staffing Specialist Pink: School Guidance Yellow: Other

SEMINOLE COUNTY PUBLIC SCHOOLS

DISTRICT BEHAVIOR CONTRACT

I, _____, do hereby acknowledge and understand that I must fully comply with the terms prescribed by this contract as a condition of my expulsion from _____ and my assignment to _____ until _____.

I understand that the terms of this contract are in force for the entire duration of my expulsion. I also understand that at the end of each grading period, my status will be evaluated and I will be allowed to continue to attend school, whether at a Seminole County Public School or at Project Excel, only if I have complied with all terms of this agreement.

I acknowledge that all acts of misconduct, minor or otherwise, will be reported to the School Board and that the School Board reserves the right to increase any disciplinary penalty imposed by the principal during the terms of this agreement.

> **I understand that any violation of this contract, including committing acts of misconduct which would not be grounds for the suspension or expulsion of other students, may be grounds for the referral of my case to the School Board for the purpose of imposing the expulsion order being held in abeyance under the terms of the attached Expulsion Waiver.**

I understand that reimposition of the expulsion order being held in abeyance under the terms of the attached Expulsion Waiver will immediately occur if I violate any component of the Zero Tolerance Policy of the Seminole County Public Schools.

In consideration for the opportunity to re-enroll in the Seminole County Public Schools or to make application to Project Excel under the terms of this contract, I hereby agree that I will:

1. follow all the rules and regulations outlined in the Student Conduct and Discipline Code;

2. attend school regularly and I understand that any absence from school must be promptly reported by my parents to the school's attendance office;

3. be prompt in moving from one class to another during class change times and be on time to class;

4. complete all class and homework assignments, and give my best effort on tests and examination.

5. not associate or socialize with students who are involved with illegal substances or weapons or who discuss or advocate the use of illegal substances or weapons on school grounds, at school functions, or school sponsored activities.

6. remain drug free and submit to drug testing and evaluation upon request of the school administration. I also agree to follow any recommendations that are made on the basis of the results of any drug testing and evaluation.

I understand that if I have successfully complied with the terms of this agreement at the completion of the term of my expulsion that I will be considered a student in good standing and the final terms of the Expulsion Waiver will be activated. At that time, this contract will be null and void.

I understand that I may not be given the opportunity to enter into a similar District Behavior Contract and Expulsion Waiver if I commit an expellable offense in any future school year.

This contract will become viable and binding immediately upon the acceptance of the Superintendent's recommendation for expulsion by the School Board, and remain in effect until _____.

A violation of this contract may result in the revocation of this contract and the imposition of an out-of-school expulsion.

_____ _____
Principal / Designee Parent / Guardian

_____ _____
Student Parent / Guardian

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____DAY OF _____, 19 ___ BY _____WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____.

_____
NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____
TYPE OR PRINT NOTARY'S NAME HERE

_____ (NOTARY SEAL)
MY COMMISSION EXPIRES

DISTRICT CONTRACT TO HOLD EXPULSION IN ABEYANCE AND STUDENT APPLICATION TO RE-ENROLL IN AN OUT-OF-ZONE SCHOOL

OPTION C

This expulsion option is to be recommended when, in the judgment of the zoned school principal, a student who committed an expellable offense would threaten the integrity of the zoned school or safety of the offending student or other students at the zoned school. An Option C recommendation is appropriate when, in the judgment of the zoned school principal, the interests of the school district and the expelled student would be best served by placement of the student in an alternative traditional school environment under the terms of an *Expulsion Waiver* and a *District Behavior Contract.*

Option C is **PRECONDITIONED** upon:

- the zoned school principal's understanding that the expelled student would pose no threat to the integrity of another traditional district school or to the offending student or other students in an alternative traditional district school
- the receiving school principal agreeing to accept the student prior to this offer being made to the student/parents
- the receiving school principal having superordinate decision making power with regard to monitoring the terms and conditions of the *Expulsion Waiver* and the *District Behavior Contract* of the expelled student.

DOCUMENTATION REQUIRED

OPTION C

The documentation listed below must be submitted to the Office of Secondary Education in order to process an Option **C** expulsion recommendation. This page may be used as a checklist to ensure all required documents are accounted for.

- ❒ **Form 535 (rev. 2/95)** - Student Expulsion Information & Summary
- ❒ **Form 644 (rev. 7/94)** - Principal's Recommendation for Expulsion
- ❒ **Form 532 (rev. 2/95)** - Out-of-School Expulsion Waiver
- ❒ **Form 955 (rev. 10/95)** - Student Discipline Incident Summary
- ❒ **Form 835 (rev. 7/94)** - Student Discipline Referral
- ❒ **Form 954 (rev. 7/94)** - Student Discipline Witness Statements
- ❒ **Form 511 (rev. 8/93)** - SST Minutes for ESE or Section 504 Students
- ❒ **District Behavior Contract**
- ❒ **A photocopy of any weapon involved an the expulsion incident.**

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT EXPULSION INFORMATION and SUMMARY

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE _____ **SEX/RACE** _____

This student is recommended for:

_____ **A.** **Expulsion** from all Seminole County Public Schools until _____ .

_____ **B.** **Expulsion** with assignment **Project Excel** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

_____ **C.** **Expulsion** with assignment **Another District School** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

_____ **D.** **Expulsion** with reentry to **Present School of Attendance** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

Is this child presently enrolled in **IDEA**? ☐ Yes ☐ No **If yes**, identify program _____

Is this child presently being screened or evaluated for services under **IDEA/Section 504**? ☐ Yes ☐ No **If yes**, identify guidance counselor _____

Is this child presently receiving **ESOL** Services? ☐ Yes ☐ No

Has this student received a packet in his/her primary language? ☐ Yes ☐ No

Have the parents received a packet in their primary language? ☐ Yes ☐ No

_____ _____

PRINCIPAL/PRINCIPAL'S DESIGNEE **DATE**

SCS FORM 535 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

PRINCIPAL'S RECOMMENDATION FOR EXPULSION

TO: _____ **DATE:** _____

_____ **STUDENT** _____

_____ **STUDENT ID#** _____

Based on an investigation by my administrative staff, I have determined that your child, _____, has committed a violation of Section _____ of the Student Conduct and Discipline Code by doing the following act(s): _____

_____

_____

_____

Because of the seriousness of the violation, I am recommending to the Superintendent that your child be expelled from the public schools of Seminole County, Florida. You are hereby notified that your child has been suspended from school. The suspension started on _____ and will end on _____ unless it is extended by the Superintendent. During this suspension and any suspension extension by the Superintendent and pending any expulsion proceedings, your child is not to be on the campus of any Seminole County Public School and is not permitted to participate in any school activity, including attendance at any athletic or other event until the suspension is ended. Failure to comply with the suspension may result in your child being arrested for trespassing. The Superintendent's office will notify you if the suspension is extended and furnish information of any further action in the matter. If you have any questions, please contact the Office of Secondary Education, Seminole County Public Schools.

_____ _____

PRINCIPAL **DATE**

I HEREBY CERTIFY THAT ON _____ I ☐ MET WITH THE STUDENT'S PARENTS

☐ ATTEMPTED TO MEET WITH THE STUDENT'S PARENT(S)/GUARDIAN(S) TO DISCUSS THE CHARGES, THE EVIDENCE IN SUPPORT OF THE CHARGES, AND THE STUDENT'S RIGHT TO A FACT FINDING HEARING BEFORE THE SCHOOL BOARD.

_____ _____

PRINCIPAL OR DESIGNEE **DATE**

SCS FORM 644 (Rev. 11/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

BEST COPY AVAILABLE

SEMINOLE COUNTY PUBLIC SCHOOLS

WAIVER OF IMPOSITION OF OUT-OF-SCHOOL STUDENT EXPULSION

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE _____ **SEX/RACE** _____

UNDERSTANDING AND WAIVERS

I agree that I have been given a copy of the expulsion packet resulting from my act of misconduct on _____. I admit that I committed the act(s) charged in the expulsion packet and that those acts violate the Student Conduct and Discipline Code. I understand that the School Board will be asked to expel me for my misconduct and that I can be expelled for the remainder of the school year and all of the next school year. Instead of imposing that penalty, I understand the following will happen if I sign this agreement:

1. I waive my right to a School Board hearing on my recommended expulsion and the penalty for this discipline violation.

2. I will be **expelled** by the School Board for my discipline violation but the expulsion will be held in **abeyance**, and will be completely **expunged** from all school records upon completion of the attached **District Behavior Contract** on _____.

3. I will return to my school or an alternative school assignment under the provisions of the attached **District Behavior Contract**.

4. That if **Project Excel** is being recommended as an alternative school assignment that this agreement provides the student only with the opportunity to make application to the program. Admission to **Project Excel** is contingent upon the results of a screening process coordinated by the Project Manager.

5. If denied admission to **Project Excel**, I shall thereafter be excluded from attendance in any and all Seminole County Public Schools for the duration of the expulsion recommendation.

6. I I violate any terms of the **District Behavior Contract**, I may be immediately suspended from school by the principal and the Superintendent will ask the School Board to implement the **Expulsion** which has been held in **abeyance**, upon a finding that I violated the contract.

7. That I will only be entitled to a hearing on the issue of the violation of the contract.

8. **That this agreement has been entered into freely and voluntarily with full knowledge of its provisions, implications, and consequences for violation.**

_____ _____

Student Signature **Parent Signature**

Date _____ **Date** _____

_____ _____

Principal's Signature **Date**

SCS FORM 532 (Rev. 11/95) Office of Secondary Education - White Copy Parent - Yellow Copy School Cost Center - Pink Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE INCIDENT STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

INVESTIGATING ADMINISTRATOR **DATE**

I HAVE READ THE ABOVE INCIDENT STATEMENT AND DISCUSSED IT WITH _____

I ☐ **AGREE** ☐ **DISAGREE WITH THE STATEMENT**

_____ _____

STUDENT'S SIGNATURE **DATE**

_____ _____

WITNESS **DATE**

On the _____ day of _____ 19____, the pupil was orally advised of the charge(s), was given an explanation of the evidence supporting the charge(s), and was given an opportunity to relate his/her version of the facts relating to the charge(s).

_____

PRINCIPAL'S SIGNATURE

SCS FORM 955 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS, FLORIDA

INCIDENT REPORT
STUDENT DISCIPLINE REFERRAL

Incident # _____
Obtain number from on-line system

UDENT NAME: _____ ESE: ____ GRADE: _____ TEAM#: _____

UDENT NUMBER: _____ REFERRED BY: _____

cident: Date: ___/___/___ Time: _____ Period: ___ Location: _____

cident Type: *(Select only one. If more than one type occurred, select only the most serious infraction)*

___ (01) Cheating
___ (02) Disobeying Bus Safety Procedures
___ (03) Disobeying School Procedures
___ (04) Disrespect/Insubordinate/Lying
___ (05) Disturbing Class/Disorderly Conduct
___ (06) Dress Code Violation
___ (07) Eating/Drinking On School Bus
___ (08) Fighting
___ (09) Larceny/Theft/Stealing
___ (10) Leaving Campus
___ (11) Leaving Class
___ (12) Missing Detention
___ (13) Missing Saturday School
___ (14) Missing In-School Suspension
___ (15) Persistent Tardies #_____
___ (16) Possession Of Tobacco
___ (17) Profanity
___ (18) Skipping Class
___ (19) Trespassing
___ (20) Truancy
___ (21) Vandalism/Damaging Property
___ (30) Other (Describe in Comments Section below)

OMMENT(S): _____

_____

_____

ITNESS(ES): _____

EACHER DISPOSITION (Prior to Current Referral):

___ Conference with Student
___ Parent Contact ___/___/___ Date
___ Referral to Guidance
___ Class Detention
___ Parent Conference ___/___/___ Date
___ Other _____

COMMENT(S): _____

_____

ADMINISTRATIVE DISPOSITION: *(Select up to Three Actions)*

___ (01) Conference With Student
___ (02) Telephone Call To Parent(s)
___ (03) Letter To Parent(s)
___ (04) Parent Conference Requested
___ (05) Referral To Guidance
___ (06) Saturday School
___ (07) Detention
___ (08) Bus Suspension
___ (09) In-School Suspension
___ (10) Out-of-School Suspension
# of Days _____
Beginning ___/___/___
Return ___/___/___
___ (11) Recommended For Dropout Prevention
___ (12) Law Enforcement Intervention (Court/JDC)
___ (13) Referred To School Resource Officer
___ (14) Involvement By Principal
___ (15) In-House Contract
___ (16) School Board Contract
___ (17) Bus Warning/Probation
___ (18) Recommended For Bus Expulsion
___ (19) Recommended For School Expulsion
___ (20) Expelled From School Without Educational Support
___ (21) Expelled From School With Educational Support
___ (22) Other _____
___ Reported To Police
___ Narcotics Involved
___ Alcohol Involved
___ Gang Related
___ Weapon

COMMENT(S) : _____

_____

_____

PARENT NAME: _____ PHONE NUMBER (H) _____ (W) _____

STUDENT SIGNATURE: _____ DATE: ___/___/___ TIME: _____

PARENT SIGNATURE: _____

ADMINISTRATOR SIGNATURE: _____ ADMIN. #: _____ DATE: ___/___/___

SCS FORM 835 (Rev. 07/94) *DISTRIBUTION*: (1) School (2) Student/Parent (3) Referrer (4) [illegible]

BEST COPY AVAILABLE

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE WITNESS STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

NAME OF WITNESSES (PLEASE PRINT OR TYPE) _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

_____

_____

_____

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_____

_____

_____

_____ _____

SIGNATURE OF WITNESS **DATE**

_____

TYPED OR PRINTED NAME OF WITNESS

STATE OF FLORIDA
COUNTY OF SEMINOLE

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ , 1995, BY _____ WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____ .

_____

NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____

TYPE OR PRINT NOTARY'S NAME HERE (NOTARY SEAL)

MY COMMISSION EXPIRES _____

THIS STATEMENT MUST BE LEGIBLE. IF THE WITNESS' HANDWRITING IS NOT LEGIBLE, THE STATEMENT MUST BE ACCOMPANIED BY A TYPED OR PRINTED COPY, WHICH MUST BE SIGNED BY THE STUDENT.

SCS FORM 954 (Rev. 10/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS
EXCEPTIONAL STUDENT EDUCATION
MEETING SUMMARY SHEET

Student _____ Date of Birth _____

School _____ Meeting Date _____

Reason for Referral _____

_____

Comments/Recommendation _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

I hereby acknowledge receipt of my procedural safeguards. My questions about the contents have been answered _____
(Parent initial)

Persons in Attendance

_____ School Administrator	_____ Teacher	_____ Teacher
_____ Psychologist	_____ Guidance	_____ Nurse
_____ Staffing Specialist	_____ Social Worker	_____ Parent
_____ Other		

SCS Form 511 R[8/93] White: Staffing Specialist Pink: School Guidance Yellow: Other

SEMINOLE COUNTY PUBLIC SCHOOLS

DISTRICT BEHAVIOR CONTRACT

I, _____, do hereby acknowledge and understand that I must fully comply with the terms prescribed by this contract as a condition of my expulsion from _____ and my assignment to _____ until _____.

I understand that the terms of this contract are in force for the entire duration of my expulsion. I also understand that at the end of each grading period, my status will be evaluated and I will be allowed to continue to attend school, whether at a Seminole County Public School or at Project Excel, only if I have complied with all terms of this agreement.

I acknowledge that all acts of misconduct, minor or otherwise, will be reported to the School Board and that the School Board reserves the right to increase any disciplinary penalty imposed by the principal during the terms of this agreement.

> **I understand that any violation of this contract, including committing acts of misconduct which would not be grounds for the suspension or expulsion of other students, may be grounds for the referral of my case to the School Board for the purpose of imposing the expulsion order being held in abeyance under the terms of the attached Expulsion Waiver.**

I understand that reimposition of the expulsion order being held in abeyance under the terms of the attached Expulsion Waiver will immediately occur if I violate any component of the Zero Tolerance Policy of the Seminole County Public Schools.

In consideration for the opportunity to re-enroll in the Seminole County Public Schools or to make application to Project Excel under the terms of this contract, I hereby agree that I will:

1. follow all the rules and regulations outlined in the Student Conduct and Discipline Code;

2. attend school regularly and I understand that any absence from school must be promptly reported by my parents to the school's attendance office;

3. be prompt in moving from one class to another during class change times and be on time to class;

4. complete all class and homework assignments, and give my best effort on tests and examination.

5. not associate or socialize with students who are involved with illegal substances or weapons or who discuss or advocate the use of illegal substances or weapons on school grounds, at school functions, or school sponsored activities.

6. remain drug free and submit to drug testing and evaluation upon request of the school administration. I also agree to follow any recommendations that are made on the basis of the results of any drug testing and evaluation.

I understand that if I have successfully complied with the terms of this agreement at the completion of the term of my expulsion that I will be considered a student in good standing and the final terms of the Expulsion Waiver will be activated. At that time, this contract will be null and void.

I understand that I may not be given the opportunity to enter into a similar District Behavior Contract and Expulsion Waiver if I commit an expellable offense in any future school year.

This contract will become viable and binding immediately upon the acceptance of the Superintendent's recommendation for expulsion by the School Board, and remain in effect until _____.

A violation of this contract may result in the revocation of this contract and the imposition of an out-of-school expulsion.

_____ _____
Principal / Designee Parent / Guardian

_____ _____
Student Parent / Guardian

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____DAY OF _____, 19 ___ BY _____WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____.

_____
NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____
TYPE OR PRINT NOTARY'S NAME HERE

_____ (NOTARY SEAL)
MY COMMISSION EXPIRES

DISTRICT CONTRACT TO HOLD EXPULSION IN ABEYANCE AND STUDENT APPLICATION TO RE-ENROLL IN THEIR ZONED SCHOOL

OPTION D

This expulsion option is to be recommended when, in the judgment of the zoned school principal, a student who committed an expellable offense would not threaten the integrity of the zoned school or safety of the offending student or other students at the zoned school. An Option **D** recommendation is appropriate when, in the judgment of the zoned school principal, the interests of the school district and the expelled student would be best served by allowing the expelled student to return to their zoned school under the terms of an *Expulsion Waiver* and a *District Behavior Contract.*

DOCUMENTATION REQUIRED

OPTION D

The documentation listed below must be submitted to the Office of Secondary Education in order to process an Option **D** expulsion recommendation. This page may be used as a checklist to ensure all required documents are accounted for.

- ☐ **Form 535 (rev. 2/95)** - Student Expulsion Information & Summary
- ☐ **Form 644 (rev. 7/94)** - Principal's Recommendation for Expulsion
- ☐ **Form 532 (rev. 2/95)** - Out-of-School Expulsion Waiver
- ☐ **Form 955 (rev. 10/95)** - Student Discipline Incident Summary
- ☐ **Form 835 (rev. 7/94)** - Student Discipline Referral
- ☐ **Form 954 (rev. 7/94)** - Student Discipline Witness Statements
- ☐ **Form 511 (rev. 8/93)** - SST Minutes for ESE or Section 504 Students
- ☐ **District Behavior Contract**
- ☐ **A photocopy of any weapon involved in an expulsion incident.**

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT EXPULSION INFORMATION and SUMMARY

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE _____ **SEX/RACE** _____

This student is recommended for:

_____ **A.** **Expulsion** from all Seminole County Public Schools until _____ .

_____ **B.** **Expulsion** with assignment **Project Excel** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

_____ **C.** **Expulsion** with assignment **Another District School** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

_____ **D.** **Expulsion** with reentry to **Present School of Attendance** under the terms of this Expulsion Waiver and a District Behavior Contract until _____ .

Is this child presently enrolled in **IDEA**? ☐ Yes ☐ No **If yes**, identify program _____

Is this child presently being screened or evaluated for services under **IDEA/Section 504**? ☐ Yes ☐ No **If yes**, identify guidance counselor _____

Is this child presently receiving **ESOL** Services? ☐ Yes ☐ No

Has this student received a packet in his/her primary language? ☐ Yes ☐ No

Have the parents received a packet in their primary language? ☐ Yes ☐ No

_____ _____

PRINCIPAL/PRINCIPAL'S DESIGNEE **DATE**

SCS FORM 535 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

PRINCIPAL'S RECOMMENDATION FOR EXPULSION

TO: _____ **DATE:** _____

_____ **STUDENT** _____

_____ **STUDENT ID#** _____

Based on an investigation by my administrative staff, I have determined that your child, _____, has committed a violation of Section _____ of the Student Conduct and Discipline Code by doing the following act(s): _____

_____

_____

_____

Because of the seriousness of the violation, I am recommending to the Superintendent that your child be expelled from the public schools of Seminole County, Florida. You are hereby notified that your child has been suspended from school. The suspension started on _____ and will end on _____ unless it is extended by the Superintendent. During this suspension and any suspension extension by the Superintendent and pending any expulsion proceedings, your child is not to be on the campus of any Seminole County Public School and is not permitted to participate in any school activity, including attendance at any athletic or other event until the suspension is ended. Failure to comply with the suspension may result in your child being arrested for trespassing. The Superintendent's office will notify you if the suspension is extended and furnish information of any further action in the matter. If you have any questions, please contact the Office of Secondary Education, Seminole County Public Schools.

_____ _____

PRINCIPAL **DATE**

I HEREBY CERTIFY THAT ON _____ I ☐ MET WITH THE STUDENT'S PARENTS

☐ ATTEMPTED TO MEET WITH THE STUDENT'S PARENT(S)/GUARDIAN(S) TO DISCUSS THE CHARGES, THE EVIDENCE IN SUPPORT OF THE CHARGES, AND THE STUDENT'S RIGHT TO A FACT FINDING HEARING BEFORE THE SCHOOL BOARD.

_____ _____

PRINCIPAL OR DESIGNEE **DATE**

SCS FORM 644 (Rev. 11/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

WAIVER OF IMPOSITION OF OUT-OF-SCHOOL STUDENT EXPULSION

SCHOOL _____ **DATE** _____ **STUDENT #** _____

STUDENT'S NAME _____ **PARENT'S NAME** _____

DATE OF BIRTH _____ **ADDRESS** _____

TELEPHONE # _____ _____

GRADE _____ **SEX/RACE** _____

UNDERSTANDING AND WAIVERS

I agree that I have been given a copy of the expulsion packet resulting from my act of misconduct on _____. I admit that I committed the act(s) charged in the expulsion packet and that those acts violate the Student Conduct and Discipline Code. I understand that the School Board will be asked to expel me for my misconduct and that I can be expelled for the remainder of the school year and all of the next school year. Instead of imposing that penalty, I understand the following will happen if I sign this agreement:

1. I waive my right to a School Board hearing on my recommended expulsion and the penalty for this discipline violation.

2. I will be **expelled** by the School Board for my discipline violation but the expulsion will be held in **abeyance**, and will be completely **expunged** from all school records upon completion of the attached **District Behavior Contract** on _____.

3. I will return to my school or an alternative school assignment under the provisions of the attached **District Behavior Contract**.

4. That if **Project Excel** is being recommended as an alternative school assignment that this agreement provides the student only with the opportunity to make application to the program. Admission to **Project Excel** is contingent upon the results of a screening process coordinated by the Project Manager.

5. If denied admission to **Project Excel**, I shall thereafter be excluded from attendance in any and all Seminole County Public Schools for the duration of the expulsion recommendation.

6. I I violate any terms of the **District Behavior Contract**, I may be immediately suspended from school by the principal and the Superintendent will ask the School Board to implement the **Expulsion** which has been held in **abeyance**, upon a finding that I violated the contract.

7. That I will only be entitled to a hearing on the issue of the violation of the contract.

8. **That this agreement has been entered into freely and voluntarily with full knowledge of its provisions, implications, and consequences for violation.**

_____ _____

Student Signature **Parent Signature**

Date _____ **Date** _____

_____ _____

Principal's Signature **Date**

SCS FORM 532 (Rev. 11/95) Office of Secondary Education - White Copy Parent - Yellow Copy School Cost Center - Pink Copy

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE INCIDENT STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

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_____

INVESTIGATING ADMINISTRATOR **DATE**

I HAVE READ THE ABOVE INCIDENT STATEMENT AND DISCUSSED IT WITH _____

I ☐ **AGREE** ☐ **DISAGREE WITH THE STATEMENT**

STUDENT'S SIGNATURE **DATE**

WITNESS **DATE**

On the ___ day of _____ 19___, the pupil was orally advised of the charge(s), was given an explanation of the evidence supporting the charge(s), and was given an opportunity to relate his/her version of the facts relating to the charge(s).

PRINCIPAL'S SIGNATURE

SCS FORM 955 (Rev. 10/95) Office of Secondary Education - White Copy School Cost Center - Pink Copy Parent - Yellow Copy

SEMINOLE COUNTY PUBLIC SCHOOLS, FLORIDA

INCIDENT REPORT
STUDENT DISCIPLINE REFERRAL

Incident # _____
Obtain number from on-line system

UDENT NAME: _____ ESE: ____ GRADE:_____ TEAM#: _____

UDENT NUMBER: _____ REFERRED BY: _____

:ident: Date: ___/___/___ Time: _____ Period: ____ Location: _____

:ident Type: *(Select only one. If more than one type occurred, select only the most serious infraction)*

___ (01) Cheating
___ (02) Disobeying Bus Safety Procedures
___ (03) Disobeying School Procedures
___ (04) Disrespect/Insubordinate/Lying
___ (05) Disturbing Class/Disorderly Conduct
___ (06) Dress Code Violation
___ (07) Eating/Drinking On School Bus
___ (08) Fighting
___ (09) Larceny/Theft/Stealing
___ (10) Leaving Campus
___ (11) Leaving Class
___ (12) Missing Detention
___ (13) Missing Saturday School
___ (14) Missing In-School Suspension
___ (15) Persistent Tardies #_____
___ (16) Possession Of Tobacco
___ (17) Profanity
___ (18) Skipping Class
___ (19) Trespassing
___ (20) Truancy
___ (21) Vandalism/Damaging Property
___ (30) Other (Describe in Comments Section below)

)MMENT(S): _____

:TNESS(ES): _____

ACHER DISPOSITION (Prior to Current Referral):

___ Conference with Student
___ Parent Contact ___/___/___ Date
___ Referral to Guidance
___ Class Detention
___ Parent Conference ___/___/___ Date
___ Other _____

COMMENT(S): _____

ADMINISTRATIVE DISPOSITION: *(Select up to Three Actions)*

___ (01) Conference With Student
___ (02) Telephone Call To Parent(s)
___ (03) Letter To Parent(s)
___ (04) Parent Conference Requested
___ (05) Referral To Guidance
___ (06) Saturday School
___ (07) Detention
___ (08) Bus Suspension
___ (09) In-School Suspension
___ (10) Out-of-School Suspension
# of Days _____
Beginning ___/___/___
Return ___/___/___
___ (11) Recommended For Dropout Prevention
___ (12) Law Enforcement Intervention (Court/JDC)
___ (13) Referred To School Resource Officer
___ (14) Involvement By Principal
___ (15) In-House Contract
___ (16) School Board Contract
___ (17) Bus Warning/Probation
___ (18) Recommended For Bus Expulsion
___ (19) Recommended For School Expulsion
___ (20) Expelled From School Without Educational Support
___ (21) Expelled From School With Educational Support
___ (22) Other _____
___ Reported To Police
___ Narcotics Involved
___ Alcohol Involved
___ Gang Related
___ Weapon

)MMENT(S) : _____

.RENT NAME: _____ PHONE NUMBER (H) _____ (W) _____

UDENT SIGNATURE: _____ DATE: ___/___/___ TIME: _____

.RENT SIGNATURE: _____

)MINISTRATOR SIGNATURE: _____ ADMIN. #: _____ DATE: ___/___/___

'S FORM 835 (Rev. 07/94) *DISTRIBUTION:* (1) School (2) Student/Parent (3) Referrer (4) [illegible]

BEST COPY AVAILABLE

SEMINOLE COUNTY PUBLIC SCHOOLS

STUDENT DISCIPLINE WITNESS STATEMENT

STUDENT _____ **STUDENT ID#** _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ SCHOOL _____

NAME OF WITNESSES (PLEASE PRINT OR TYPE) _____

STATEMENT OF INCIDENT *(USE ADDITIONAL SHEETS IF NECESSARY TO COMPLETE STATEMENT)*
PLEASE NOTE HOW? WHEN? WHERE? WHAT? WHY? WHO?

_____

_____

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_____

_____

_____ _____

SIGNATURE OF WITNESS **DATE**

_____

TYPED OR PRINTED NAME OF WITNESS

STATE OF FLORIDA
COUNTY OF SEMINOLÆ

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ , 1995, BY _____ WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____ .

_____

NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____

TYPE OR PRINT NOTARY'S NAME HERE (NOTARY SEAL)

MY COMMISSION EXPIRES _____

THIS STATEMENT MUST BE LEGIBLE. IF THE WITNESS' HANDWRITING IS NOT LEGIBLE, THE STATEMENT MUST BE ACCOMPANIED BY A TYPED OR PRINTED COPY, WHICH MUST BE SIGNED BY THE STUDENT.

SCS FORM 954 (Rev. 10/95)

Office of Secondary Education - White Copy
School Cost Center - Pink Copy
Parent - Yellow Copy

PAGE 02
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SEMINOLE COUNTY PUBLIC SCHOOLS
EXCEPTIONAL STUDENT EDUCATION
MEETING SUMMARY SHEET

Student _____ Date of Birth _____

School _____ Meeting Date _____

Reason for Referral _____

_____

Comments/Recommendation _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

I hereby acknowledge receipt of my procedural safeguards. My questions about the contents have been answered _____
(Parent initial)

Persons in Attendance

_____ School Administrator _____ Teacher _____ Teacher

_____ Psychologist _____ Guidance _____ Nurse

_____ Staffing Specialist _____ Social Worker _____ Parent

_____ Other

SCS Form 511 R[8/93] White: Staffing Specialist Pink: School Guidance Yellow: Other

SEMINOLE COUNTY PUBLIC SCHOOLS

DISTRICT BEHAVIOR CONTRACT

I, _____, do hereby acknowledge and understand that I must fully comply with the terms prescribed by this contract as a condition of my expulsion from _____ and my assignment to _____ until _____.

I understand that the terms of this contract are in force for the entire duration of my expulsion. I also understand that at the end of each grading period, my status will be evaluated and I will be allowed to continue to attend school, whether at a Seminole County Public School or at Project Excel, only if I have complied with all terms of this agreement.

I acknowledge that all acts of misconduct, minor or otherwise, will be reported to the School Board and that the School Board reserves the right to increase any disciplinary penalty imposed by the principal during the terms of this agreement.

> **I understand that any violation of this contract, including committing acts of misconduct which would not be grounds for the suspension or expulsion of other students, may be grounds for the referral of my case to the School Board for the purpose of imposing the expulsion order being held in abeyance under the terms of the attached Expulsion Waiver.**

I understand that reimposition of the expulsion order being held in abeyance under the terms of the attached Expulsion Waiver will immediately occur if I violate any component of the Zero Tolerance Policy of the Seminole County Public Schools.

In consideration for the opportunity to re-enroll in the Seminole County Public Schools or to make application to Project Excel under the terms of this contract, I hereby agree that I will:

1. follow all the rules and regulations outlined in the Student Conduct and Discipline Code;

2. attend school regularly and I understand that any absence from school must be promptly reported by my parents to the school's attendance office;

3. be prompt in moving from one class to another during class change times and be on time to class;

4. complete all class and homework assignments, and give my best effort on tests and examination.

5. not associate or socialize with students who are involved with illegal substances or weapons or who discuss or advocate the use of illegal substances or weapons on school grounds, at school functions, or school sponsored activities.

6. remain drug free and submit to drug testing and evaluation upon request of the school administration. I also agree to follow any recommendations that are made on the basis of the results of any drug testing and evaluation.

I understand that if I have successfully complied with the terms of this agreement at the completion of the term of my expulsion that I will be considered a student in good standing and the final terms of the Expulsion Waiver will be activated. At that time, this contract will be null and void.

I understand that I may not be given the opportunity to enter into a similar District Behavior Contract and Expulsion Waiver if I commit an expellable offense in any future school year.

This contract will become viable and binding immediately upon the acceptance of the Superintendent's recommendation for expulsion by the School Board, and remain in effect until _____.

A violation of this contract may result in the revocation of this contract and the imposition of an out-of-school expulsion.

_____ _____
Principal / Designee Parent / Guardian

_____ _____
Student Parent / Guardian

SWORN TO/AFFIRMED AND SUBSCRIBED BEFORE ME THIS _____DAY OF _____, 19 ___ BY _____WHO IS PERSONALLY KNOWN TO ME OR WAS IDENTIFIED BY THE FOLLOWING FLORIDA DRIVER'S LICENSE, STUDENT IDENTIFICATION CARD OR _____ _____.

_____
NOTARY PUBLIC STATE OF FLORIDA AT LARGE

_____
TYPE OR PRINT NOTARY'S NAME HERE

_____ (NOTARY SEAL)
MY COMMISSION EXPIRES

FORMS IN SPANISH

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

HOJA DE RESUMEN E INFORMACION DE EXPULSION ESTUDIANTIL

ESCUELA_____ **FECHA**_____ **#** **ESTUDIANTE**_____

NOMBRE DEL ESTUDIANTE_____ **NOMBRE PADRES**_____

FECHA DE NACIMIENTO_____ **DIRECCION**_____

TELEFONO_____ _____

GRADO_____ **RAZA**___**GENERO**_____

ESTUDIANTE ES RECOMENDADO PARA:

_____ **A.** **Expulsión fuera de las Escuelas Públicas del Condado de Seminole hasta _____.**

_____ **B.** **Expulsión con asignación al Proyecto Excel bajo los términos del Contrato de Conducta y del Contrato de Acuerdo y Renuncias hasta _____.**

_____ **C.** **Expulsión con asignación a Otra Escuela del Distrito bajo los términos del Contrato de Conducta y del Contrato de Acuerdos y Renuncias hasta_____.**

_____ **D.** **Expulsión con re-admisión a la Escuela de Asistencia Actual bajo los términos del Contrato de Conducta y del Contrato de Acuerdos y Renuncias hasta _____.**

Se encuentra matriculado este estudiante en IDEA? **Si**_____**No**_____**Si contesta si, identifique programa**

_____

Se esta analizando o evaluando a este estudiante para los servicios bajo IDEA/SECCION 504? **Si**_____ **No**_____**Si contesta si, identifique al consejero**

_____

Recibe al presente el estudiante servicios de ESOL? **Si**_____**No**_____

Ha recibido el estudiante un paquete en su lenguaje primario? **Si**_____**No**_____

Han recibido los padres un paquete en su lenguaje primario? **Si**_____**No**_____

_____ _____

FIRMA DEL DIRECTOR/A O SU DESIGNADO **FECHA**

SCS FORM 535 (REV. 10/95)

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

RECOMENDACION DEL DIRECTOR/A PARA EXPULSION

A: _____ **FECHA:**_____

_____ **ESTUDIANTE:**_____

_____ **NUM. ID. ESTUDIANTE**_____

Basado en una investigación por parte de mi personal administrativo, Yo he determinado que su hijo/a,_____, ha cometido una violación a la Sección _____ del Código de Conducta y Disciplina cometiendo el/los siguiente/s acto/s:

_____
_____
_____
_____
_____

Por la seriedad de la violación, Yo estoy recomendando al Superintendent que expulse a su hijo/a de las Escuelas Públicas del Condado de Seminole, Florida. Por este medio queda usted notificado que su hijo/a ha sido suspendido/a de la escuela. La suspensión comenzó el _____y terminará el _____, a menos que sea extendida por el Superintendente. Durante la duración de esta suspensión y cualquier extensión a esta suspensión por parte del Superintendente y mientras esté pendiente cualquier proceso de expulsión, su hijo/a no puede estar en los terrenos de cualquier Escuela Pública del Condado de Seminole y no le será permitido participar en ninguna actividad escolar, incluyendo asistencia a eventos deportivos o cualquier otro evento hasta que la suspensión termine. El no cumplir con esto puede resultar en el arresto de su hijo/a por traspaso. La oficina del Superintendente le notificará si la suspensión es extendida y le proveerá información sobre cualquier otra acción tomada en el asunto. Si usted tiene alguna pregunta, favor de comunicarse con la Oficina de Educación Secundaria, Escuelas Públicas del Condado de Seminole.

_____ _____
DIRECTOR/A **FECHA**

POR LA PRESENTE CERTIFICO QUE EL DIA_____YO ME REUNI CON LOS PADRES DE _____.

_____INTENTE REUNIRME CON LOS PADRES/GUARDIANES DEL ESTUDIANTE PARA DISCUTIR LOS CARGOS Y LA EVIDENCIA QUE APOYA LOS CARGOS, Y LOS DERECHOS DEL ESTUDIANTE A UNA VISTA PARA IDENTIFICAR LOS HECHOS ANTE LA JUNTA ESCOLAR.

_____ _____
DIRECTOR/A O SU DESIGNADO **FECHA**

SCS FORM 644 (Rev. 11/95)

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

CONTRATO PARA EL ESTUDIANTE EN LUGAR DE IMPOSICION DE EXPULSION

ESCUELA_____FECHA_____ #ESTUDIANTE_____

NOMBRE ESTUDIANTE_____NOMBRE PADRES_____

FECHA DE NACIMIENTO_____DIRECCION_____

TELEFONO_____ _____

GRADO_____ GENERO_____ RAZA_____

ACUERDOS Y RENUNCIAS

Estoy en acuerdo de haber recibido copia del paquete de expulsión como resultado de mi acción de mala conducta del día _____. Yo admito que cometí el acto(s) del cual se me acusa en el paquete de expulsión y que estos actos violan el Código de Conducta y Disciplina. Yo entiendo que la Junta de Directores será peticionada para que se me expulse por mi mala conducta y que puedo ser expulsado por el tiempo que queda del año y por el año siguiente. En lugar de la imposición de esta penalidad, yo entiendo que se hará lo siguiente si firmo este contrato:

1. Yo renuncio a mi derecho a una vista ante la Junta Escolar en cuanto a la recomendación para expulsión y la penalidad que conlleva esta violación de disciplina.

2. Yo seré expulsado por la Junta Escolar por mi violación de disciplina pero la expulsión quedará en suspenso y será retirada del expediente al completarse este Contrato de Conducta del Distrito.

3. Yo regresaré a mi escuela o a la escuela alternativa asignada bajo lo provisto en el Contrato de Conducta del Distrito adjunto.

4. Si la recomendación es la asignación a "Project Excel" como escuela alternativa entiendo que este acuerdo me provee la oportunidad de solicitar entrada al programa. La admisión a "Project Excel" es contingente basado en los resultados del proceso de escrutinio coordinado por el gerente del proyecto.

5. Si la admisión a "Project Excel" es denegada, en lo sucesivo yo seré excluido de asistir a cualquier y toda Escuela Pública del Condado de Seminole por la duración del tiempo recomendado por la expulsión.

6. Si violo cualquier condición del contrato, seré suspendidio inmediatamente de la escuela por el Director y el Superintendente pedirá a la Junta Escolar que se implante la EXPULSION que ha quedado en suspenso, al encontrar que se ha violado el contrato.

7. Que tendré derecho a una vista en cuanto al incidente en violación al contrato.

8. Que he entrado libre y voluntariamente a este acuerdo con total conocimiento de sus provisiones, implicaciones y las consecuencias que conlleva una violación.

_____ _____

Firma del Estudiante Firma de los Padres

Fecha_____ Fecha_____

Firma del Director_____ Fecha_____

SCS FORM 532 (REV. 11/95

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

CONTRATO DE CONDUCTA DEL DISTRITO

Yo, _____, reconozco y entiendo que tengo que cumplir con los términos ordenados de este contrato como condición de mi expulsión de la escuela _____ y con asignación a _____hasta _____.

Yo entiendo que los términos de este contrato permanecerán vigentes durante el período de mi expulsión. También entiendo que al final de cada semestre, mi progreso será evaluado y que me será permitido continuar en la escuela, ya sea, una de las Escuelas Públicas del Condado de Seminole o en el Proyecto Excel, solamente si cumplo con todos los términos de este acuerdo.

Yo reconozco que todo acto de mala conducta, siendo de menor o mayor gravedad, serán comunicados a la Junta Escolar del Condado de Seminole, y que esta Junta se reserva el derecho de aumentar cualquier castigo disciplinario impuesto por el director de la escuela durante el término de este acuerdo.

Yo entiendo que cualquiera violación de este contrato, incluyendo actos de mala conducta los cuales no fuesen motivo para la suspensión o expulsión de otros estudiantes, puede ser motivo para referir mi caso a la Junta Escolar del Condado de Seminole con el propósito de imponer la orden de expulsión que se encuentre en suspenso bajo los términos del documento adjunto(Contrato en Lugar de Expulsión).

Yo entiendo que la re-imposición de la orden de expulsión que se encuentra en suspenso, bajo las condiciones descritas en el Contrato de Acuerdos y Renuncias se hará efectiva de inmediato si ocurre cualesquier violación contra la Política de Cero Tolerancia de las Escuelas Públicas del Condado de Seminole.

En consideración a la oportunidad de re-admisión a las Escuelas Públicas del Condado de Seminole o la oportunidad de solicitar admisión al Proyecto Excel bajo los términos de este contrato, atesto que haré lo siguiente:

1. **seguir todas las reglas y reglamentos indicados en el Código de Conducta y Discplina;**

2. **asistir a la escuela con regularidad y entiendo que cualquier ausencia deberá ser comunicado de inmediato por mis padres o guardianes, a la oficina de asistencia;**

3. **ser puntual en trasladarme de una clase a la otra durante el cambio de clases y ser puntual a las clases;**

4. **terminar toda asignación, y dar el máximo esfuerzo en las pruebas y examenes.**

5. **no me he de asociar o socializar con estudiantes que esten involucrados en el uso o manejo de sustancias controladas o ilegales o con algún tipo de arma en el campus de la escuela, en funciones escolares o actividades relacionados con la escuela.**

6. **me mantendré libre de drogas y me someteré a pruebas para determinar el uso de drogas y a cualquier evaluación que la administración de la escuela requiera. También he de seguir cualquier recomendación que se haga basado en los resultados de las pruebas y las evaluaciones.**

Entiendo que si he cumplido con los términos de este contrato durante el término de mi expulsión, seré considerado como un estudiante en buena posición y los términos finales del Contrato de Acuerdos y Renuncias será activado. En ese momento este contrato quedará nulo y no valido.

Entiendo que no se me dará la oportunidad de entrar en otro Contrato de Expulsión de cometer alguna falta e ofensa expulsable en cualquier año futuro.

Este contrato será viable y efectivo inmediato a la aprobación del Superintendente a la aceptación de la recomendación de expulsión por la Junta Escolar, y quedará en efecto hasta la fecha de _____.

Cualquier violación a este contrato puede resultar en la revocación de este contrato y la imposición de una expulsión fuera del sistema escolar.

_____	_____
Director/Designado	**Padres/Guardianes**
_____	_____
Estudiante	**Padres/Guardianes**

JURADO Y SUSCRITO ANTE MI ESTE DIA_____DE_____, 19__ POR _____A QUIEN CONONZCO PERSONALMENTE O QUE SE HA IDENTIFICADO POR LA LICENCIA DE CONDUCIR, TARJETA DE IDENTIFICACION DE ESTUDIANTE O_____.

NOTARIO PUBLICO DEL ESTADO DE FLORIDA

_____
ESCRIBA A MAQUINILLA O EN LETRA DE MOLDE
NOMBRE DEL NOTARIO

_____
MI COMISION EXPIRA EL DIA

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

SUMARIO DEL INCIDENTE DE DISCIPLINA ESTUDIANTIL

ESTUDIANTE_____ **NUM. ID. ESTUDIANTE** _____

Fecha del incidente_____**Hora del incidente**_____**Escuela**_____

DECLARACION DEL INCIDENTE (USE HOJAS ADICIONALES DE SER NECESARIO PARA COMPLETAR DECLARACION) FAVOR DE ANOTAR COMO? CUANDO? DONDE? QUE? PORQUE? Y QUIEN?

_____

_____

_____

_____

_____

_____

_____ _____

INVESTIGADOR ADMINISTRATIVO **FECHA**

YO HE LEIDO LA DECLARACION ANTERIOR Y LO HE DISCUTIDO CON_____

YO_____ **ESTOY EN ACUERDO** **NO**_____ **ESTOY EN ACUERDO**

_____ _____

FIRMA DEL ESTUDIANTE **FECHA**

_____ _____

TESTIGO **FECHA**

El día _____**de**_____**19**__**, se le informó verbalmente al estudiante del cargo(s), y se le dió una explicación de la evidencia que apoya el cargo(s), y se le dió la oportunidad de relatar su versión de los hechos en relación al cargo(s).**

_____

FIRMA DEL DIRECTOR/A

SCS FORM 955 (REV. 10/95)

ESCUELA PUBLICAS DEL CONDADO DE SEMINOLE

DECLARACION DISCIPLINARIA DEL ESTUDIANTE TESTIGO

ESTUDIANTE_____ **NUM. ID. ESTUDIANTE** _____

Fecha del incidente_____**Hora del incidente**_____**Escuela**_____

DECLARACION DEL INCIDENTE (USE HOJAS ADICIONALES DE SER NECESARIO PARA COMPLETAR DECLARACION) FAVOR DE ANOTAR COMO? CUANDO? DONDE? QUE? PORQUE? Y QUIEN?

_____

_____

_____

_____

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_____

_____ _____

FIRMA DEL TESTIGO **FECHA**

_____

NOMBRE DEL TESTIGO (LETRA MOLDE O MAQUINILLA)

ESTADO DE LA FLORIDA
CONDADO DE SEMINOLE

JURADO A/CONFRIMADO Y SUBSCRITO ANTE MI ESTE _____**DIA DE** _____, 19 __, **POR**_____**A QUIEN CONOZCO PERSONALMENTE O QUIEN HA SIDO IDENTIFICADO DE LA SIGUIENTE FORMA, LICENCIA DE CONDUCTOR DEL ESTADO DE LA FLORIDA, TARJETA DE IDENTIFICACION ESTUDIANTIL, O** _____.

_____

NOTARIO PUBLICO DEL ESTADO DE LA FLORIDA EN GENERAL

_____

NOMBRE DEL NOTARION EN LETRA MOLDE O MAQUINILLA **(SELLO DEL NOTARIO)**

MI LICENCIA EXPIRA _____

ESTA DECLARACION DEBE SER LEGIBLE SI LA LETRA DEL TESTIGO NO ES LEGIBLE, LA DECLARACION DEBE SER ACOMPANADA POR UNA COPIA ESCRITA EN LETRA DE MOLDE O A MAQUINILLA, LA CUAL DEBE ESTAR FIRMADA POR EL/LA ESTUDIANTE TESTIGO.

SCS FORM 954A

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

OBSERVACION DE EL/LA MAESTRO/A DEL ESTUDIANTE

FAVOR DE ESCRIBIR A MAQUINILLA O EN TINTA NEGRA SOLAMENTE.

Esta evaluación será reproducida por la Escuela como información para la posible expulsión del estudiante.

Nombre de la Escuela: _____Fecha:_____

Nombre del Estudiante:_____R/G____Grado_____

Nombre del Maestro/a:_____Asignatura:_____

Record de Asistencia: (desde_____) Días Presente_____Días Ausente____Tardanzas_____

1. **Presta el estudiante atención en clases? siempre_____ A veces_____ nunca_____**

2. **Tiene el/la estudiante una actitud de cooperación y el deseo de aprender _____si _____no**

3. **Si la actitud de el/la estudiante no es deseable, por favor indique la caraceterística(s) que mejor decriben su actitud o comportamiento: malhumorado/a ____indiferente____rudo/a____ antagonista_____ travieso/a _____otro_____**

4. **Es este estudiante en alguna forma un problema disciplinario? siempre____ a veces ____nunca ____**

5. **Ha notado usted cualquier cambio en la actitud del estudiante y en sus habitos de trabajo desde el comienzo del año escolar o del semestre? si ____ no ____**

FAVOR DE HACER COMENTARIOS EN RELACION A CUALQUIER CAMBIO QUE USTED HAYA NOTADO O DE CUALQUIER PROBLEMA DE DISCIPLINA QUE USTED HAYA TENIDO CON ESTE ESTUDIANTE:

_____

_____

_____

_____

Favor devolver a _____ en o antes de _____
MES/DIA/AÑO

SCS FORM 472 (REV. 10/95)

ESCUELAS PUBLICAS DEL CONDADO DE SEMINOLE

EDUCACION PARA ESTUDIANTES EXCEPCIONALES
HOJA DEL RESUMEN DE LA REUNION

ESTUDIANTE_____**FECHA DE NACIMIENTO**_____

ESCUELA_____**FECHA DE REUNION**_____

RAZON DEL REFERIDO_____

_____

COMENTARIOS/RECOMENDACION_____

_____

_____

_____

_____

_____

_____

_____

POR ESTE MEDIO RECONOZCO HABER RECIBIDO DIRECCIONES EN CUANTO AL PROCESO. MIS PREGUNTAS EN CUANTO AL CONTENIDO HAN SIDO CONTESTADAS _____
INCIALES DEL PADRE

PERSONAS PRESENTE

_____**Administrador Escolar**_____**Maestro/a**_____**Maestro/a**

_____**Sicólogo** _____ **Consejero**_____**Enfermera**

_____**Especialista de Ubicación**_____ **Trabajador/a Social** _____**Padres**

_____**Otros**